

## South Central Conference: Safety in emergency surgical practice Friday 29 September 2017 Grand Harbour Hotel, Southampton



Time	Торіс	Speakers
8.45 am	Registration, refreshments and networking	
9.30 am	Welcome and Introduction	Mr Andrew Miles RCS Regional Director (South Central) Professor Jane Reid Clinical Lead, Wessex Patient Safety Collaborative
Session 1: Foundations of surgical safety in emergencies		Chair: Mr Andrew Miles
9.45 am	What does safe surgery look like?	
10.05 am	Providing safe emergency care	Mr Ian Eardley RCS Vice President and Lead on EGS and Improving Surgical Training projects
10.25 am	Lessons from the Emergency Laparotomy Collaborative and the launch of the Wessex Emergency Surgery Network	Mr James Kirkby-Bott Consultant General Surgeon, University Hospitals Southampton Tracy Broom Associate Director, Patient Safety Collaborative
10.45 am	Panel Q&A	
11.00 am	Refreshments, networking and poster voting	
11.20 am	PRCS address	Professor Derek Alderson RCS President
11.40 am	Breakout – Session 1	
12.25 pm	Breakout – Session 2	
1.10 pm	Lunch, networking and poster voting	
Session 2: Lo	earning for a safer service	Chair: Mr James Kirkby-Bott
2.10 pm	Breakout – Session 3	
2.55 pm	Refreshments	
3.05 pm	Ad-hoc Teams	<b>Dr Suzanne Kellett</b> Consultant Anaesthetist, University Hospitals Southampton
3.25 pm	Learning from Never Events – moving forward for a better service	Mr Tony Berendt Medical Director, Oxford University Hospitals
3.45pm	Investigating impact of errors on surgeons	<b>Mr Kevin Turner</b> Consultant urological surgeon, Royal Bournemouth Hospitals
4.05 pm	Panel Q&A	
4.20 pm	Keynote Address	Jane Carthy Human Factors and Patient Safety Specialist
4.50 pm	Poster competition announcement and prizes Closing comments	Mr Andrew Miles and Professor Jane Reid

## **Breakout sessions**

Торіс	Speakers	Brief
Models of Care: Emergency General Service – lessons from the SW Senate	Mr Paul Eyers RCS Regional Director (South West) Consultant General Surgeon, Musgrove Park Hospital	Review from South West of models of emergency care recently presented to Clinical Senete – session to focus on the proposals adopted and being rolled out in the South West
Making the most of Multi- Disciplinary team meetings	<b>Dr Guy Titley</b> Consultant Anaesthetist, Royal Bournemouth and Christchurch Hospitals NHS FT	
Major trauma in Wessex – how the system is improving patient outcomes	Dr lan Mew Consultant in Anaesthetics & Intensive Care Medicine, Dorset County Hospital NHS Foundation Trust Dr Simon Hughes Consultant Major Trauma Anaesthetist, University Hospitals Southampton	Mortality from major trauma (ISS>15) has decreased by 63% since the establishment of Major Trauma Centre's and Major Trauma Networks in 2012. Wessex MTN and UHS as the Wessex MTC is proud to have delivered this locally through completely modifying the recognition and management of major trauma. Transferable lessons exist that may be of benefit in surgery where similar goals are sought.
Addressing Workforce Challenges – how best to utilise the Extended Surgical Team	<b>Clare Sutherland</b> Lead advanced Nurse Practitioner, Royal Derby Hospital	Update on the RCS Extended Surgical Team <u>project</u> and will include a case study about how EST roles have benefited patients and the team in Derbyshire.
Running safe tertiary services	<b>Mr Ryan Waters</b> Consultant Neurosurgeon, Southampton Children's Hospital	Focusing on head trauma / neurosurgery
Introduction of a Surgical Quality Assurance Meeting	<b>Mr Stuart Mercer</b> Consultant General and Upper GI Surgeon, Portsmouth Hospitals NHS Trust	Traditional surgical morbidity & mortality meetings are not fit for purpose. The ASGBI have published guidelines for implementing a weekly SQAM as a tool for discussing patient outcomes & processes, with a view to quality improvement. This presentation describes the challenges to faced whilst implementing the SQAM, and charts the progress as it becomes embedded in the culture of the hospital.
Chole QUIC	Mr John Abercrombie Project clinical lead and RCS Council Member	Chole-QuIC is a new project initiated by the Royal College of Surgeons (RCS) and aims to reduce time to urgent cholecystectomy for eligible patients with acute biliary pain or cholecystitis or gallstone pancreatitis, by using quality improvement (QI) methodology to empower clinicians to drive change within their own hospital trusts.
Laparoscopic emergency surgery – reduced hospital	<b>Mr Philip Pucher</b> Specialist Surgical Registrar, Southampton General Hospital	The emergency surgery service in Portsmouth is run by specialist upper

stay & improved patient GI and colorectal surgeons with					
outcomes	<b>Mr Stuart Mercer</b> Consultant General and Upper GI Surgeon, Portsmouth Hospitals NHS Trust	expertise in laparoscopic surgery. Over the last 3 years we have steadily increased our use of laparoscopy for emergency surgery cases; 65% of cases are started laparoscopically, and in two-thirds of these patients surgery is successfully completed laparoscopically. This has led to an improved patient experience and a reduced length of stay in hospital.			
Using Structured Mortality Reviews to learn from surgical deaths	Miss Anne Pullyblank Consultant Colorectal Surgeon and Clinical Director for Patient Safety for the West of England AHSN Kevin Hunter Patient Safety Programme Manager for the West of England AHSN	To describe the new structured mortality review tool. To demonstrate how it can be adapted specifically for surgery, in particular for patients who underwent an Emergency Laparotomy. To include a practical example of a case review.			
Training in a Consultant delivered service	<b>Mr Simon Dennis</b> Head of School (Wessex) Consultant ENT Surgeon, University Hospital Southampton	This interactive session will focus on how to train in surgical emergencies by embedding it in to our day to day surgical practise as multi-disciplinary simulation.			
The extended surgical team: fact or fiction	Adrian Jones President, Association for Perioperative Practitioners	With the advent of trauma units and advanced trauma interventions, the Surgical Care Practitioner offer a flexible solution to clinical directors adapting surgical provision, whilst ensuring training opportunities for surgical trainees at junior CT1/2 and senior ST3 – ST 8 level. This presentation will discuss how the Orthopaedic department of the Norfolk and Norwich University Hospital has introduced innovative models of inpatient trauma care.			
Human Factors in an Emergency context	Professor Jane Reid Clinical lead, Wessex Patient Safety Collaborative	This session will explore the science of human factors (ergonomics) in an emergency context highlighting common deviations in optimum practice that undermine quality patient care and increase the potential to avoidable harm. In particular the concept of 'collective leadership' of the surgical/perioperative team will be examined, together with strategies for addressing and affecting safer care, optimising outcome.			
Unconscious Bias	<b>Mrs Scarlett McNally</b> RCS Council Member Consultant Orthopaedic Surgeon, East Sussex Healthcare NHS Trust	Humans do pattern recognition. The danger is when we act on our assumptions. This is unconscious bias. This reduces the chances for people who don't fit the stereotype and can lead to bullying. Scarlett McNally helped the Australian campaign where most alleged bullies			

The positive impact of engaging with Care of the Elderly speciality in relation to surgical / patient outcomes	Ed Hewertson Emma Willets	did not realise how they were perceived: <u>www.surgeons.org/respect</u> . She led on the College publication: <u>www.rcseng.ac.uk/avoiding-</u> <u>unconscious-bias</u> . This happy session will consider strategies for individuals (eg focussing on the task not the individual, saying hello, performance management, assertiveness, resilience and mentoring) and for organisations (because diverse organisations are more resilient). A workshop on the RBCH project which linked COE with the ELC. In particular the learning around Parkinson's disease.
Hampshire Hospitals Foundation Trust	Title and speakers TBC	
A report on a five trust programme to improve emergency surgery pathways for appendicitis using a human factors approach	Professor Peter McCulloch Honorary consultant Upper GI surgeon, Professor of surgical science and practice	