



The Society for Cardiothoracic Surgery  
The Royal College of Surgeons  
35-43 Lincoln's Inn Fields  
London

SCTS Members

Dear SCTS Member

## **Collection of data for national audits during the COVID-19 emergency and recovery phases**

This letter clarifies our current position on clinical audit collection and subsequent reporting during this unprecedented situation.

In recent days the Society has received queries from members about data collection for national audits during COVID-19. The COVID-19 situation was discussed at the Executive Meeting on Monday 23<sup>rd</sup> March.

### **The SCTS recognises the following principles;**

- The COVID-19 pandemic is an international health emergency. Responding to it must be prioritised*
- COVID-19 will have profound impacts on the surgical treatment of heart and chest diseases. Patient pre-operative morbidity, the organisation of services and the resources available are changing radically. Some clinicians are already working in new areas or indeed new organisations.*
- Clinicians, teams and organisations will need to make decisions very differently than they would in ordinary circumstances.*
- Current risk adjustment models may not accurately predict outcome in these new circumstances*
- The outcomes after surgery are expected to be different from those achieved during normal operating conditions.*
- In these difficult circumstances, it is particularly important that national audits, the SCTS and other organisations support clinicians to deliver the best care possible.*

*-It is important that we learn as much as possible from these events.*  
Collecting audit data is a vital part of clinical practice, and it is particularly important during periods of radical change.

We have therefore agreed the following recommendations. They apply to all national audits that affect cardiothoracic surgery, including the NICOR audits, the Lung Cancer Clinical Outcomes Publication (LCCOP), the National Lung Cancer Audit (NLCA) and the Trauma Audit and Research Network (TARN).

## **Recommendations**

*-Audit data should continue be collected, to document the outcomes of surgery and to allow future analysis and reflection. Although this will involve work for clinicians, but this must be balanced against the risk of operating without understanding the outcomes achieved.*

*-Activity and outcomes during COVID-19 will not be representative of normal practice. We therefore believe that the results from this period should be analysed and reported as a specific cohort, and not grouped together in a wider audit period.*

*-The Society will encourage NICOR and HQIP to report outcomes during this period, **but to avoid publication at individual clinician or unit level***

Members should consider supporting specific research studies, such as the CovigSurg project from the NIHR Global Health Research Unit (<https://globalsurg.org/covidsurg/>) if local resources allow.

We continue to monitor the situation. Our aim is always to support clinicians and teams to provide the best care possible to their patients.

Please contact us if you have anything to contribute or add.

With best wishes



Simon Kendall  
President, SCTS



Doug West  
Chair, Audit Subcommittee  
Thoracic Audit Lead



Uday Trivedi  
Audit lead, Adult Cardiac Surgery



Carin Van Doorn  
Audit Lead, Congenital Cardiac Surgery