Ministear airson Slàinte Phoblach is Slàinte Bhoireannach Jenni Minto BPA



Minister for Public Health and Women's Health Jenni Minto MSP

T: 0300 244 4000 E: <u>scottish.ministers@gov.scot</u>

Ms Clare Haughey MSP Chair, Health, Social Care and Sport Committee

By email: HSCS.committee@Parliament.Scot

20 June 2023

Dear Ms Haughey

## Report of the Transvaginal Mesh Case Record Review

I am writing to you to advise the Committee that Professor Alison Britton has concluded the Transvaginal Mesh Case Record Review and her report has been published on the Scottish Government website. The report can be accessed <u>here</u>.

The Transvaginal Mesh Case Record Review, led by Professor Britton, was established in 2020. The intention of the Review was to give women with concerns regarding discrepancies in their records about whether they had received full or partial mesh removal, as well as others who had more general concerns regarding their treatment and healthcare experiences, the opportunity to discuss their clinical records with an impartial panel. This was with a view to helping them better understand those records, and providing the opportunity for amendment if any discrepancies were found. The Review was undertaken entirely independently of the Scottish Government.

Professor Britton's report has provided 21 recommendations focussed on topics such as:

- consent discussions between women and their clinicians and keeping a detailed record of these discussions;
- time afforded to discussion and contemplation of options before giving consent to surgery;
- information available to patients about the Scottish mesh treatment pathway;
- credentialling of clinicians in mesh removal;
- support for women after mesh removal surgery with out of NHS providers, and;

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• consistent data gathering and sharing throughout UK specialist mesh services, including on longer term outcomes of treatments.

Scottish Government officials are currently giving consideration to the contents of the report and its recommendations and further updates will follow in due course. However, it should be noted that work is already underway in many of the areas that the recommendations are centred on. For example, recommendation 3 is for additional support mechanisms to be put in place for GPs and practice teams to aid understanding and address concerns women may raise with them following a transvaginal mesh surgery, and a mesh learning package has this month been made available to GP's on TURAS, NHS Scotland's digital learning platform. Steps are also already being taken to improve patient information resources including improvements to the website for the Complex Mesh Surgical Service and the development of a patient information leaflet.

I hope that the Committee will find the information in this letter helpful.

Yours sincerely,

Jenni Murt

Jenni Minto MSP

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