

Trust Board Report

| | |
|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Meeting Date: | 27 th June 2016 |
| Title: | Participation in early Implementation of 7 day services |
| Executive Summary: | RWT has been chosen as an early implementer of 7 day service provision for patients admitted for emergency and urgent care. The expectation is that as a minimum 4 priority standards will be delivered by end of March 2017. Early self-assessment suggests that in some services 7 day services are already met but further work is required to make this consistent across the Trust. Involvement in this programme of work will provide the Trust with an opportunity to improve quality of care for patients and will bring significant recognition to the Trust as being at the forefront of redesign and modernisation. |
| Action Requested: | To receive for information. |
| Report of: | Dr Jonathan Odum - Medical Director |
| Author: Contact Details: | Jane McKiernan - Project Lead - 7 Day Services/OP Redesign Tel 01902 307999 X6444 Email: janemckiernan@nhs.net |
| Links to Trust Strategic Objectives | Numbers 3, 4 & 6 |
| Resource Implications: | Revenue: Capital: Workforce: Funding Source: |
| Equality and Diversity Assessment | |
| Risks: BAF/ TRR (describe risk and current risk score) | |
| Public or Private: (with reasons if private) | Public |
| References: (eg from/to other committees) | Report to Trust Management Committee |
| Appendices/ References/ Background Reading | |

| | |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>NHS Constitution: (How it impacts on any decision-making)</p> | <p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> ✚ Equality of treatment and access to services ✚ High standards of excellence and professionalism ✚ Service user preferences ✚ Cross community working ✚ Best Value ✚ Accountability through local influence and scrutiny |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Background Details

BACKGROUND

NHS England has committed to providing a 7 day service across the NHS by end of 2020. Whilst patients requiring Emergency care have always been able to access hospital services 7 days each week, subsequent management and access to services at weekends has not been consistent in its provision.

More recently the 7 day service aspiration has been refined to provision of care for those requiring urgent care. It includes consideration of how the health economy assess need, develop and provide a management plan and then subsequently discharge patients from acute care.

The rationale is to enhance patient experience and quality of care, prevent unnecessary admissions, eliminate delays in decision making and treatment and facilitate timely transfer of care to appropriate settings.

10 clinical standards have been developed (Table 1) against which progress will be assessed. These standards have been endorsed by the Academy of Medical Royal Colleges. Four of these standards were developed as those most likely to tackle variation in mortality associated with weekend admissions. A further 6 have been chosen as those which will improve quality of care for patients.

26 Trusts across the country have been chosen as Early Implementers of these standards, RWT and University Hospitals Leicester are the sole Midland representatives. The task is to ensure that 4 priorities are achieved by end of March 2017 and the following 6 soon afterwards. These 26 Trusts cover 25% of the population; by 2020 the expectation is that 100% of the population will have access to compliant services every day of the week.

Table 1 Ten Standards Used to Assess Provision of 7 Day Services

| STANDARD NUMBER | DESCRIPTOR |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------|
| 1 | <u>Patient Experience</u> : Active involvement in decision making. |
| 2 (Priority) | <u>Time to first Consultant Review</u> : To see a consultant within 14 hours of Admission. |
| 3 | <u>Multidisciplinary Review</u> : An integrated management plan with EDD to be in place within 24 hours of admission. |
| 4 | <u>Shift Handovers</u> : Handover to be led by a senior decision maker and consistent across 7 days. |
| 5 (Priority) | <u>Diagnostics</u> : Scheduled 7 day access to consultant directed and reported tests for critical, urgent and non-urgent care. |

| STANDARD NUMBER | DESCRIPTOR |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6 (Priority) | <u>Intervention:</u> 24 access to consultant directed interventions e.g. endoscopy, emergency surgery. |
| 7 | <u>Mental Health:</u> Psychiatric liaison within 1 hour for emergency and 14 hours for urgent care needs. |
| 8 (Priority) | <u>On-going Review:</u> All patients in high dependency areas should be seen by a consultant, twice daily and in all other areas once daily, seven days each week. |
| 9 | <u>Transfer to Community, primary & social care:</u> Support services available 7 days each week to respond to consultant management plan. |
| 10 | <u>Quality Improvement:</u> All those involved in the delivery of care should be involved 7 days each week in the review of patient outcomes. |

i. WORK TO DATE

Health Economy 7 day services Project Group has been set up with representatives from RWT, WCCG, Social services and Mental Health Trust.

An RWT working group currently consists of Medical Director, Chief Operating Officer and Divisional Medical Directors.

A Project lead has now been identified to support Directorates to identify gaps and to find solutions to rectify where there is non-compliance.

In March 2016 RWT completed a 7 day assessment tool (requiring audit of 280 notes) against the priority areas. Results from this national tool are still awaited.

RWT are involved at national level in influencing change to the interpretation of these national standards.

Early feedback suggests that many clinical areas are compliant and do deliver 7 day consultant assessment and review, however there are some services that do not meet the standard and where work is on-going to rectify this.

It is clear that seven day service provision is not reflected in all job plans.

ii. FUTURE FOCUS

Continued work to identify the specific clinical conditions/directorates where non-compliance exists.

Job Planning information will provide information on which to understand where service redesign and/ or reallocation of resources may be required.

Implementation of a Communication strategy is required to include patients, carers and other support services both within and external to the Trust.

Further input from Social services and mental health services is required to support improved discharge at weekend.