

Cover page	
Meeting	Trust Board
Paper No.	14
Paper Title	7 Day Services Board Assurance Briefing and Update
Date of meeting	7 th February 2019
Date paper was written	22 nd January 2019
Responsible Director	Dr Edwin Borman, Medical Director
Author	Mr Mark Cheetham, Care Group Medical Director Sam Hooper, Medical Performance Manager

Executive Summary

This paper summarises progress to date of delivery of the NHS England requirement of the four priority standards for 7 day working being delivered by 2020.

The four priority standards are:

- Standard 2: Time to Consultant Review
- Standard 5: Access to Diagnostics
- Standard 6: Access to Consultant-directed Interventions
- Standard 8: On-going Review

Whilst we are partially compliant on some of the standards we will not be able to be fully compliant until Future Fit has been implemented due to configuration and workforce gaps. This is likely to be after the national requirement of delivery by 2020. Details of performance are attached (Appendix 1) 7 Day Services Board Assurance Briefing.

Previously considered by

This paper has been presented at Workforce Committee on 25th January 2019. Workforce Committee requested that this is added to the risk register. This has been added to the Risk Register – 1541.

The Board is asked to:

<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Receive	<input type="checkbox"/> Note	<input type="checkbox"/> Take Assurance
To formally receive and discuss a report and approve its recommendations or a particular course of action	To discuss, in depth, noting the implications for the Board or Trust without formally approving it	For the intelligence of the Board without in-depth discussion required	To assure the Board that effective systems of control are in place

Link to CQC domain:

<input checked="" type="checkbox"/> Safe	<input checked="" type="checkbox"/> Effective	<input type="checkbox"/> Caring	<input checked="" type="checkbox"/> Responsive	<input type="checkbox"/> Well-led
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Link to strategic objective(s)

	<input type="checkbox"/> PATIENT AND FAMILY Listening to and working with our patients and families to improve healthcare <input type="checkbox"/> SAFEST AND KINDEST Our patients and staff will tell us they feel safe and received kind care <input type="checkbox"/> HEALTHIEST HALF MILLION Working with our partners to promote 'Healthy Choices' for all our communities <input type="checkbox"/> LEADERSHIP Innovative and Inspiration Leadership to deliver our ambitions <input type="checkbox"/> OUR PEOPLE Creating a great place to work
Link to Board Assurance Framework risk(s)	RR 561 If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards RR 668 If we are unable to implement our clinical service vision in a timely way then we will not deliver the best services to patients

Equality Impact Assessment	<input checked="" type="radio"/> Stage 1 only (no negative impact identified) <input type="radio"/> Stage 2 recommended (negative impact identified and equality impact assessment attached for Board approval)
Freedom of Information Act (2000) status	<input type="radio"/> This document is for full publication <input type="radio"/> This document includes FOIA exempt information <input checked="" type="radio"/> This whole document is exempt under the FOIA
Financial assessment	

Main Paper

Situation

NHS England produced their Seven Day Services Clinical Standards update in February 2016 at which there was an expectation to meet clinical standards 2, 5, 6 and 8 to be implemented by March 2020.

Background

On 27/7/2015 we received a letter from the Medical Directors of NHS England, TDA and Monitor with regard to the NHS 7 Day Service Forum (NHS England Publications Gateway 03837). This was with regard to the developed ten clinical standards describing the minimum level of service that hospital patients admitted through urgent and emergency routes should expect to receive on every day of the week.

SaTH were identified by NHSI as having the capabilities to meet the four clinical standards, 2, 5, 6 and 8 by March 2018.

- Standard 2: Time to Consultant Review
- Standard 5: Access to Diagnostics
- Standard 6: Access to Consultant-directed Interventions
- Standard 8: On-going Review

A 7 Day Services Working Group was re-established in November 2016 which is chaired by Mark Cheetham on behalf of the Medical Director with representation from each care group.

The purpose of this working group is to plan, identify workforce gaps, financial implications and develop business plans for each area to enable implementation of these four key standards.

The working group is also keeping sight of the additional 6 standards and working up plans to identify the gaps in resources and workforce to enable implementation.

Mr Mark Cheetham, Care Group Medical Director and Sam Hooper, Medical Performance Manager provided a presentation to update the Trust Board in February 2018.

Assessment

We have made progress in assessing and improving our current provision of 7 day services standards.

- We have ongoing problems delivering standard 2.
- We have largely delivered standard 5 except for weekend ultrasound and MRI where there is ongoing work.
- We have largely delivered standard 6 except for interventional radiology where we have informal cover over the weekend and out of hours. We are pursuing potential partnership arrangements with an adjacent Trust to address this.
- We have not met Standard 8 at an organisational level however the audits have demonstrated that we are close to achieving this standard.

We do not feel that full delivery of these standards is possible until such time is that Future Fit has been implemented – this is in contrast to the NHSi ambition to deliver this nationally by 2020 and significantly later than the original thought that SaTH could meet these standards by March 2018.

This is currently on the risk register (1541) to be discussed at the next Operational Risk Group meeting with a provisional risk score of 15.

See Appendix 1 – 7 Day Services Board Assurance Briefing Paper.

Recommendation

The Board is asked to approve the contents of the 7 Day Services Board Assurance Briefing update for submission to NHS England.



7 Day Hospital Services Self-Assessment

Organisation	The Shrewsbury and Telford NHS Trust
Year	2018/19
Period	Autumn/Winter

Priority 7DS Clinical Standards

Clinical standard	Self-Assessment of Performance	Weekday	Weekend	Overall Score
<p>Clinical Standard 2: All emergency admissions must be seen and have a thorough clinical assessment by a suitable consultant as soon as possible but at the latest within 14 hours from the time of admission to hospital.</p>	<p>Performance improvements since September 2016 in 62% of Trusts. Majority of Trusts meeting this standard for over 70% of patients. This is recognised as the most challenging standard Nationally. SaTH's Audit Results: September 2016 - 71% March 2017 - 71% September 2017 - 70% April 2018 - 79%</p> <p>Two site configuration makes this a challenge for SaTH. Recent recruitment to Emergency Medicine will improve this, ultimately the Future Fit proposal to have one emergency centre will allow us to deliver this on a sustainable basis.</p>	No, the standard is not met for over 90% of patients admitted in an emergency	No, the standard is not met for over 90% of patients admitted in an emergency	Standard Not Met

Clinical standard	Self-Assessment of Performance	Weekday	Weekend	Overall Score	
<p>Clinical Standard 5: Hospital inpatients must have scheduled seven-day access to diagnostic services, typically ultrasound, computerised tomography (CT), magnetic resonance imaging (MRI), echocardiography, endoscopy, and microbiology. Consultant-directed diagnostic tests and completed reporting will be available seven days a week:</p> <ul style="list-style-type: none"> • Within 1 hour for critical patients • Within 12 hour for urgent patients • Within 24 hour for non-urgent patients 	<p>Q: Are the following diagnostic tests and reporting always or usually available on site or off site by formal network arrangements for patients admitted as an emergency with critical and urgent clinical needs, in the appropriate timescales?</p> <p>Largely delivered in most modalities. Work ongoing in Radiology to improve access to MRI and ultrasound at weekends.</p>	Microbiology	Yes mix of on site and off site by formal arrangement	Yes mix of on site and off site by formal arrangement	Standard Not Met
		Computerised Tomography (CT)	Yes available on site	Yes available on site	
		Ultrasound	Yes available on site	No the test is only available on or off site via informal arrangement	
		Echocardiography	Yes available on site	Yes available on site	
		Magnetic Resonance Imaging (MRI)	Yes available on site	No the test is only available on or off site via informal arrangement	
		Upper GI endoscopy	Yes available on site	Yes available on site	

Clinical standard	Self-Assessment of Performance	Weekday	Weekend	Overall Score	
Clinical Standard 6: Hospital inpatients must have timely 24 hour access, seven days a week, to key consultant-directed interventions that meet the relevant specialty guidelines, either on-site or through formally agreed networked arrangements with clear written protocols.	Q: Do inpatients have 24-hour access to the following consultant directed interventions 7 days a week, either on site or via formal network arrangements? 	Critical Care	Yes available on site	Yes available on site	Standard Met
		Interventional Radiology	Yes available on site	No the intervention is only available on or off site via informal arrangement	
		Interventional Endoscopy	Yes available on site	Yes available on site	
		Emergency Surgery	Yes available on site	Yes available on site	
	There is a long standing national shortage of interventional radiologists. We are exploring the potential of joint appointments with other Trusts to achieve this standard.	Emergency Renal Replacement Therapy	Yes available on site	Yes available on site	
		Urgent Radiotherapy	Yes available on site	Yes available on site	
		Stroke thrombolysis	Yes available on site	Yes available on site	
		Percutaneous Coronary Intervention	Yes available off site via formal arrangement	Yes available off site via formal arrangement	
	Cardiac Pacing	Yes available on site	Yes available on site		

Clinical standard	Self-Assessment of Performance	Weekday	Weekend	Overall Score
Clinical Standard 8: All patients with high dependency needs should be seen and reviewed by a consultant TWICE DAILY (including all acutely ill patients directly transferred and others who deteriorate). Once a clear pathway of care has been established, patients should be reviewed by a consultant at least ONCE EVERY 24 HOURS, seven days a week, unless it has been determined that this would not affect the patient's care pathway.	Performance against standards: September 2016 Once Daily Review - 91% Twice Daily Review - 78% March 2017 Once Daily Review - 83% Twice Daily Review - 87% September 2017 Not audited April 2018 Once Daily Review - 84% Twice Daily Review - 86% Largely delivered in critical care at RSH. Situation in critical care at PRH due to manpower issues, single critical care rota for the county under discussion. Poor flow of patients and duplication of assessment areas makes this challenging in other areas.	Once Daily: No the standard is not met for over 90% of patients admitted in an emergency	Once Daily: No the standard is not met for over 90% of patients admitted in an emergency	Standard Not Met
		Twice Daily: No the standard is not met for over 90% of patients admitted in an emergency	Twice Daily: No the standard is not met for over 90% of patients admitted in an emergency	

7DS Clinical Standards for Continuous Improvement

Self-Assessment of Performance against Clinical Standards 1, 3, 4, 7, 9 and 10
<p>1. Patient Experience September 2016 - 97% March 2017 - 89% September 2017 - 96% April 2018 - 95%</p> <p>3. MDT Review We have increased access to therapies at weekends and there is a plan to trial weekend pharmacy over the winter period.</p> <p>4. Shift Handover Dealt with as part of the Care Group Standard work roll out.</p> <p>7. Mental Health Service Level agreement provided by RAID.</p> <p>9. Transfer to Community, Primary and Social Care Stranded work led by Gemma McIver-Paddock has led to dramatic reduction in numbers of long stay patients.</p> <p>10. Quality Improvement This is reviewed as part of the Trust Mortality Group and Speciality Governance Meetings. Oversight of these will be strengthened with the appointment of the Director of Clinical Effectiveness.</p>

7DS and Urgent Network Clinical Services

	Hyperacute Stroke	Paediatric Intensive Care	STEMI Heart Attack	Major Trauma Centres	Emergency Vascular Services
Clinical Standard 2	Yes, the standard is met for over 90% of patients admitted in an emergency	N/A - service not provided by this trust	N/A - service not provided by this trust	N/A - service not provided by this trust	Yes, the standard is met for over 90% of patients admitted in an emergency
Clinical Standard 5	Yes, the standard is met for over 90% of patients admitted in an emergency	N/A - service not provided by this trust	N/A - service not provided by this trust	N/A - service not provided by this trust	Yes, the standard is met for over 90% of patients admitted in an emergency
Clinical Standard 6	Yes, the standard is met for over 90% of patients admitted in an emergency	N/A - service not provided by this trust	N/A - service not provided by this trust	N/A - service not provided by this trust	Yes, the standard is met for over 90% of patients admitted in an emergency
Clinical Standard 8	Yes, the standard is met for over 90% of patients admitted in an emergency	N/A - service not provided by this trust	N/A - service not provided by this trust	N/A - service not provided by this trust	Yes, the standard is met for over 90% of patients admitted in an emergency

Assessment of Urgent Network Clinical Services 7DS performance (OPTIONAL)

Template completion notes

Trusts should complete this template by filling in all the yellow boxes with either a free text assessment of their performance as advised or by choosing one of the options from the drop down menus.