

Title: Seven Day Hospital Services Survey
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The Seven Day Hospital Services (7DS) Programme was developed to support providers of acute services to deliver high quality care and improve outcomes, on a seven-day basis for patients admitted to hospital in an emergency.

To support quality improvement and measure progress in the achievement of 7DS, trusts complete a self-assessment survey. This demonstrates the management of patients admitted as an emergency, measured against 4 priority clinical standards. These are standards for first consultant review within 14 hours (Clinical Standard 2), appropriate ongoing consultant reviews for patients (Clinical Standard 8), providing an assessment of their provision of relevant diagnostics (Clinical Standard 5) and consultant directed interventions (Clinical Standard 6).

From 2019, 7DS will be measured through a board assurance framework. This process consists of a standard template to assess progress in delivering 7DS, which is then assured by the Trust Board of Directors before submitting results to regional and national 7DS teams.

Survey: February 2019

Previous 7DS surveys had been collected retrospectively. The new format for 2019 onwards will survey a sample of patients prospectively over a 7 day period. This survey covered the 7 days from 13th - 19th February 2019.

An initial sample size of 140 patients was used, spread across 4 clinical divisions

Clinical Standard 2 - Time to 1st Consultant Review

The proportion of patients seen and assessed by a suitable consultant within 14 hours of admission is: 94%.

Table 1: Time from admission to 1st consultant review by day of the week (based on day of admission)

	Day of Admission							Weekday	Weekend	Total
	Wed	Thu	Fri	Sat	Sun	Mon	Tue			
Number of patients reviewed by a consultant within 14 hours	19	31	25	18	15	14	9	99	33	131
Number of patients reviewed by a consultant outside of 14 hours	2	4	0	1	0	0	2	8	1	9
Total	21	35	25	19	15	14	11	107	34	140
Proportion of patients reviewed by a consultant within 14 hours of admission	90%	89%	100%	95%	100%	100%	82%	93%	97%	94%

Chart 1: Hours between admission and 1st consultant review

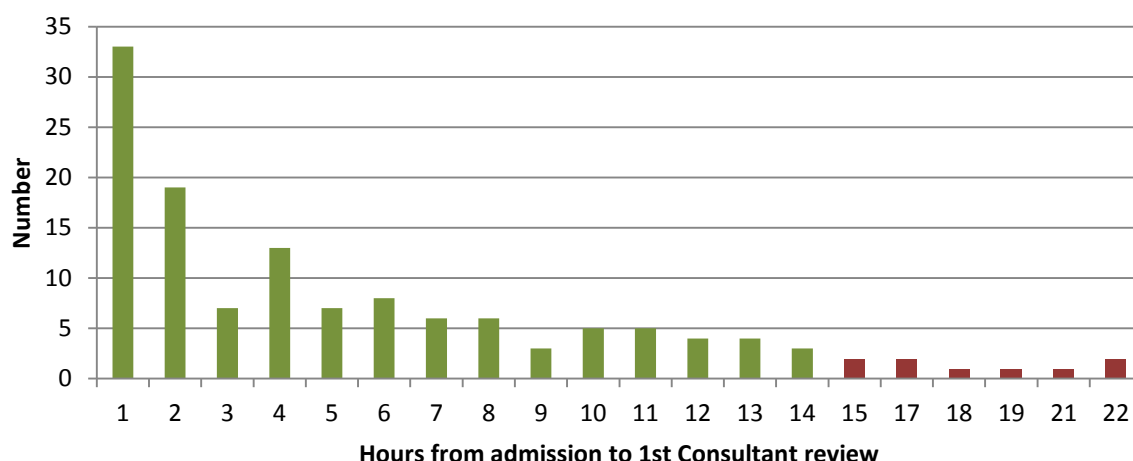


Table 2: Proportion of patients reviewed by a consultant within 14 hours of admission at hospital - survey comparison

	Survey			
	Sep-16	Mar-17	Apr-18	Feb-19
Proportion of patients reviewed by a consultant within 14 hours of admission at hospital	74%	93%	85%	94%

Table 3: Time to 1st consultant review, within 14 hours of admission, by admission location

Admission Point	Weekday				Weekend			
	Within 14 hours	Outside of 14 hours	Total	Proportion reviewed within 14 hours	Within 14 hours	Outside of 14 hours	Total	Proportion reviewed within 14 hours
Acute Medicine (EAU)	73	1	74	99%	25	0	25	100%
Cardiology	2	0	2	100%				
Surgical Admissions Unit (Ward 11)	4	0	4	100%	3	1	4	75%
Gynaecology	3	1	4	75%				
Paediatric Medicine	6	4	10	60%	1	0	1	100%
Paediatric T&O	0	1	1	0%				
Trauma (T&O) Admissions (Ward 11)	7	1	8	87.5%	4	0	4	100%
Stroke Medicine	3	0	3	100%				
Total	98	8	106	92.5%	33	1	34	97%

Clinical Standard 8 – On-going Consultant Review

- The overall proportion of patients who required twice daily consultant reviews and were reviewed twice by a Consultant was 100 %.
- The overall proportion of patients who required a daily Consultant review and were reviewed by a Consultant was 90 %. This was split into 94% at a weekday & 79% at a weekend.

92.1% of the patients received a Consultant review on Day 1 of their emergency admission.

Table 4: Day 1 Consultant review by location specialty

Area	Weekday				Weekend			
	Received required review	No review	Total	Proportion receiving required review	Received required review	No review	Total	Proportion receiving required review
Acute Medicine (EAU)	27	0	27	100%	11	3	14	79%
Cardiology	7	0	7	100%	1	0	1	100%
Endocrine	1	0	1	100%	3	0	3	100%
Gastroenterology	3	0	3	100%	0	0	0	NA
Geriatrics	6	0	6	100%	6	0	6	100%
Gynae	4	0	4	100%	0	0	0	NA
Haematology	0	0	0	NA	1	0	1	100%
ITU	0	0	0	NA	3	0	3	100%
Medical outlier	1	0	1	100%	0	0	0	NA
Oncology	0	0	0	NA	1	0	1	100%
Paediatric Medicine	8	0	8	100%	3	0	3	100%
Respiratory	20	0	20	100%	3	0	3	100%
Stroke Medicine	2	0	2	100%	2	0	2	100%
Surgery	4	1	5	80%	3	0	3	100%
T&O	5	3	8	67%	1	2	3	33%
Winter Ward	2	1	3	33%	1	1	2	50%
	90	5	95	94.7%	39	6	45	86.6%

90.1% of patients received a further Consultant review, if appropriate, during days 2-5 of their admission.

Trauma and Orthopaedics Service is an outlier for Consultant reviews.

Clinical Standard 5 - Access to Diagnostics

Responses to the question '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?'

Table 5 Provision of consultant directed diagnostic tests

Service	Weekday	Weekend
	February 2019	February 2019
CT	Yes	Yes
Echocardiograph	Yes	Yes
Microbiology	Yes	Yes
MRI	Yes	Yes
Ultrasound	Yes	Yes
Upper GI Endoscopy	Yes	Yes

Clinical Standard 6 - Access to Interventions

Responses to the question 'Do inpatients have 24 hour access to consultant directed interventions 7 days a week, either on site or via formal network arrangements?'

Table 6: Provision of consultant directed interventions

Service	Weekday	Weekend
	February 2019	February 2019
Critical Care	Yes	Yes
Primary Percutaneous Coronary Intervention	Yes	Yes
Cardiac Pacing	Yes	Yes
Thrombolysis for Stroke	Yes	Yes
Emergency General Surgery	Yes	Yes
Interventional Endoscopy	Yes	Yes
Interventional Radiology	Yes	Yes
Renal Replacement	Yes	Yes
Urgent Radiotherapy	Yes	Yes

Additional Clinical standards

As well as the 4 priority Clinical Standards, the 7DS programme includes six Standards for Continuous Improvement.

Clinical Standard

Evidence to support on-going progress

1 – Patient experience

We have adopted the ResPECT programme which should be rolled out by the end of April 2019 in relation to Standard 1

3 – Multidisciplinary team review

There is a multi-professional Board round every morning on all wards led by a senior decision maker for Standard 2. These are regularly observed by the senior leadership team

4 – Shift handovers

We have set handovers which are recorded electronically on NerveCentre for Standard 4.

7 – Mental health

We have 24/7 access to emergency mental health support for children and adults for standard 7.

9 – Transfer to community, primary and social care

There is 24/7 support in and outside the trust for discharge support for standard 9

10 – Quality improvement

All of our quality data is reviewed at Exec and NED led multi-professional, cross divisional meetings for standard 10.

Conclusion

All 10 7DS Clinical Standards are vital to consistently high quality care, and taken as a whole, impact positively on the quality of care and patient experience.

The 7DS survey demonstrated that the Trust met all four of the priority Clinical Standards with the exception of required Consultant review at the weekend. Trauma and Orthopaedics Service is an outlier and this has been raised with their leadership team.