7 Day Hospital Services Self-Assessment

Organisation	**Sandwell and West Birmingham NHS Trust**
Year	**2018/19**
Period	**Autumn/Winter**

NHS

Sandwell and West Birmingham NHS Trust

Priority 7DS Clinical Standards

Clinical standard	Self-Assessment of Performance	Weekday	Weekend	Overall Score
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.	Spring audit results at Trust level for this standard were: weekdays 73% compliance and weekends 85% compliance. Exceptions by speciality, local audit and improvement plan summarised below: 1) Acute Medicine weekday 99%, weekend 36%. Rotas and job plans compliant with 7 day standard. Local focus on documentation now and implementation of an electronic patient record in 2019 will improve data quality. Service reconfiguration work aligned to the Midland Metropolitan Hospital delay until 2022 has identifed acute medicine and supporting acute admitting specialties for potential reconfiguration which will support 7 day standards compliance. A date for reaudit will be agreed pending plans and timelines for reconfiguration or by the end of Q1. 2) Surgical specialties - Rotas and job plans compliant with 7 day standard. Specialties reaudited post spring survey in Q3; General Surgery, T&O and Urology combined weekday performance was 73%. Weekend compliance 14%. All patients admitted to surgical assessment unit complied with the standard. All other patients were reviewed by an SPR. Improvement work is focussed in scheduling patients reviews on ward rounds to ensure all patients are seen within the standard. Plan to reaudit in Q1. 3) Paediatrics spring survey results weekday 53% and weekend 63%. Local audit repeated in Q3. Review of weekend job plans to mitigate risk of undercompliance with additioanl focus on documentation. The Trust Urgent Care Board oversees 7 day standards with membership of all Clinical Groups. Plans for compliance are determined towards Midland Metropolitan Hospital which brings 2 acute hospitals onto a single acute site but is delayed until 2022. A Quality and Sustainability Committee has been set up to oversee the transition of services over the time delay and the risk assessment includes 7 day service standards.	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
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: • Within 1 hour for critical patients • Within 12 hour for urgent patients • Within 24 hour for non-urgent patients	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?	Microbiology	Yes available off site via formal arrangement	Yes available off site via formal arrangement	Standard Met
		Computerised Tomography (CT)	Yes available on site	Yes available on site	
		Ultrasound	Yes available on site	Yes available on site	
	The Trust is compliant with this standard and have set internal response times for reporting from request for radiology tests to be tracked. MRI at weekend is for cord compression studies.	Echocardiography	Yes available on site	Yes available on site	
		Magnetic Resonance Imaging (MRI)	Yes available on site	Yes available on site	
		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	Yes mix of on site and off site by formal arrangement	
		Interventional Endoscopy	Yes available on site	Yes available on site	
		Emergency Surgery	Yes available on site	Yes available on site	
	The Trust is compliant with this standard. Pathology services were reconfigured to the Black Country Pathology Partnership in Q3 2018.	Emergency Renal Replacement Therapy	Yes available on site	Yes available on site	
		Urgent Radiotherapy	Yes available off site via formal arrangement	Yes available off site via formal arrangement	
		Stroke thrombolysis	Yes available on site	Yes available on site	
		Percutaneous Coronary Intervention	Yes available on site	Yes available on site	
		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.	Spring survey results were 98% complaince for twice daily review and 90% for daily review. The Trust has invested in level 1 care in the last year to support higher levels of care outside of ICU for NIV and surgery.	Once daily: Yes the standard is met for over 90% of patients admitted in an emergency	Once daily: Yes the standard is met for over 90% of patients admitted in an emergency	Standard Met
		Twice daily: Yes the standard is met for over 90% of patients admitted in an emergency	Twice daily: Yes the standard is 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
Provide a brief overall summary of performance against these standards, highlighting areas where progress has been made since 2015: 1. Patient experience - current surveys do not split weekend or weekday responses. This will be reconsidered for the 2019 programme. 3. MDT review - discharge planning improvement has included introduction of criteria led discharge particularly at weekends supported by ECIST. All transfers to community beds are RAG rated for safety and effectiveness which includes medication transfer. These are reviewed weekly with CEO and Chief Nurse. 4. Shift handovers - hospital at night handover is standardised to include patient for review. Patients for weeekend reviews are identified on the electronic bed management system. Critical Care outreach now 24/7 to support care of deteriorating patients outside of critical care. Safety handovers in critical care include patients who have stepepd down from ICU care in last 24 hours to wards. Investment in consultant of the week in medicine has established continuity at consultant level on wards over a fortnight. 7. Mental health - the trust is not a provider of mental health services but does host an acute liaison service 24/7 on both acute sites. 9.Transfers to community, primary and social care - Discharge coordinators and a complex discharge team support discharge pathways to community and social care settings. Availability of TTAs now >70% available on medical wards the day before discharge from a baseline of 40% in the autumn 2018. Rapid reposnse therpaies based in both EDs 7 days a week support assessment for discharge home from ED. Social care work 7 days a week and packages of care available 7 days a week. Discharge rates are lower at the weekend largely linked to nursing home assessment and bed capacity. All transfers to community beds and district nurisng are RAG rated for safety and effectiveness. 10. Quality improvement; readmissions within peer range; mortality data measured via RAMI month to month is closely aligned weekdays to weekends. Previously this was differentiated 16 months ago. Current RAMI 105 aim to achieve < 100; speciality level analysis and focus is informing improvement work .

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	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
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	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
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	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
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	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

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

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.