

Report Title	Results Endorsement		
Sponsoring Executive	David Carruthers – Medical Director		
Report Author	David Carruthers – Medical Director		
Meeting	Trust Board (Public)	Date	2 nd April 2020

1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on]*

Results endorsement continues to be an important focus. Improvement has been shown with compliance with endorsement of results (Radiology = 74%, Pathology = 80%). Data is shown for pre- and post-unity time points and ongoing work to maintain this and improve further is discussed.

2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan	X	Public Health Plan		People Plan & Education Plan	
Quality Plan	X	Research and Development		Estates Plan	
Financial Plan		Digital Plan		Other <i>[specify in the paper]</i>	

3. Previous consideration *[where has this paper been previously discussed?]*

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4. Recommendation(s)

The Trust Board is asked to:

- | | |
|-----------|--|
| a. | NOTE the current data on results endorsement |
| b. | NOTE the monitoring that is ongoing |
| c. | NOTE the improvement in results endorsement and the efforts made to improve the systems |

5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register	X	Risk 2642				
Board Assurance Framework	X					
Equality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed
Quality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to the Public Trust Board: 2nd April 2020

Results Endorsement

1. Introduction or background

- 1.1 Results Endorsement is an important part of safe and quality care we provide. We have been monitoring the acknowledgement of radiological investigations ordered pre-unity and also radiological and pathological investigations ordered post-unity.
- 1.2 The post-unity standard was set at: in-patient reports should be endorsed within three days and out-patients within three weeks. This report for compliance on this standard is still under review as it is currently pulling in data of endorsed results and not all individuals are identified as being associated with the correct speciality area for several reasons. Therefore progress with results endorsement is monitored using the cut over report from the start of unity. Data accuracy seems more robust although it is not possible to split into in-patient and out-patient areas but it does give an indication of how an overall speciality is doing and where specific individuals may be struggling with work to endorse results. Current data is as shown in Annex 1 for Dec – Feb with 80% pathology and 74% radiology results being endorsed (as at 26.03.2020). This is an improvement from the beginning of February when figures were 69% and 59% for pathology and radiology respectively.
- 1.3 We have produced guides on the optimum process or blood sample collection as well as an end-to-end pathway from collection to sample analysis. This has been produced to minimise any technical problems with ordering. Previous issues have been identified and many addressed but ordering within radiology maintains a focus. Areas that can occasionally lead to the lack of reports arrival in message centre are :
- a. radiology cancel any requests but requestors are not notified
 - b. radiology modify the exam requested so it does not come back as a solicited and therefore endorseable result.
 - c. Orders are made outside the patient encounter so they do not come back as endorseable.
 - d. In the old system the results of tests are not always appearing as needing endorsing in CDA but we are regularly monitoring unendorsed results in the old system to make sure Red Flag results are not missed.
- 1.4 Data for Red Flag reports from pre-unity are shown in Annex 2. There are very few unendorsed results since unity and most of those pre-unity are in acute care and low risk of not having been acted on. The situation continues to be monitored, and any reports post-unity in CDA are generally from investigations ordered pre-unity

2. Summary

- 2.1 80% of blood test results are endorsed and 74% of radiological investigations. It is not possible with current data to be able to say whether this is predominantly in- or out-patient areas though those specialty areas that are predominantly out-patient based tend to have a significantly higher endorsement rate compared with others, though there is a definite overall improvement. Data analysed in February showed 69% of pathology results being endorsed and 59% of radiology. So the improvement to 80% and 74% respectively is good progress.

3. Recommendations

- 3.1 The Trust Board is asked to:
- a. **NOTE** the current data on results endorsement
 - b. **NOTE** the monitoring that is ongoing
 - c. **NOTE** the improvement in results endorsement and the efforts made to improve the systems

David Carruthers
Medical Director
27th March 2020

Annex 1: Table of pathology and radiology report endorsement by month

Annex 2: Outstanding Red Flag reports in CDA

Table of pathology and radiology report endorsement by month

	Un-endorsed	Endorsed	Total	
December	11673	45156 (80%)	56829	Pathology
	3090	7622 (71%)	10712	XR
January	14293	675143 (82%)	81806	Pathology
	3616	10220 (74%)	13836	XR
February	14714	59440 (80%)	7450	Pathology
	3317	9206 (74%)	12523	XR

Outstanding Red Flag reports in CDA

	2019 Pre-unity	2019/2020 Post-unity
Admitted care	11	6
Emergency Care	1991	0
Long-term Care	44	11
PCCT	6	0
Surgery	146	10
WCH	3	6