

# 7 Day Hospital Services and Paediatrics

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### **There is strong evidence for a variation in outcomes for patients admitted to hospital at the weekend.**

A substantial body of evidence exists which indicates significant variation in outcomes for patients admitted to hospitals in an emergency, at the weekend across the NHS in England.

This variation is seen in:

- mortality rates
- patient experience
- length of hospital stay
- re-admission rates

Additionally medical, nursing, other health professional and managerial staffing levels, as well as trainee doctors' perceptions of supervision by consultants, also vary by day of the week.

## A set of clinical standards were identified to support seven day hospital services

### Priority clinical standards

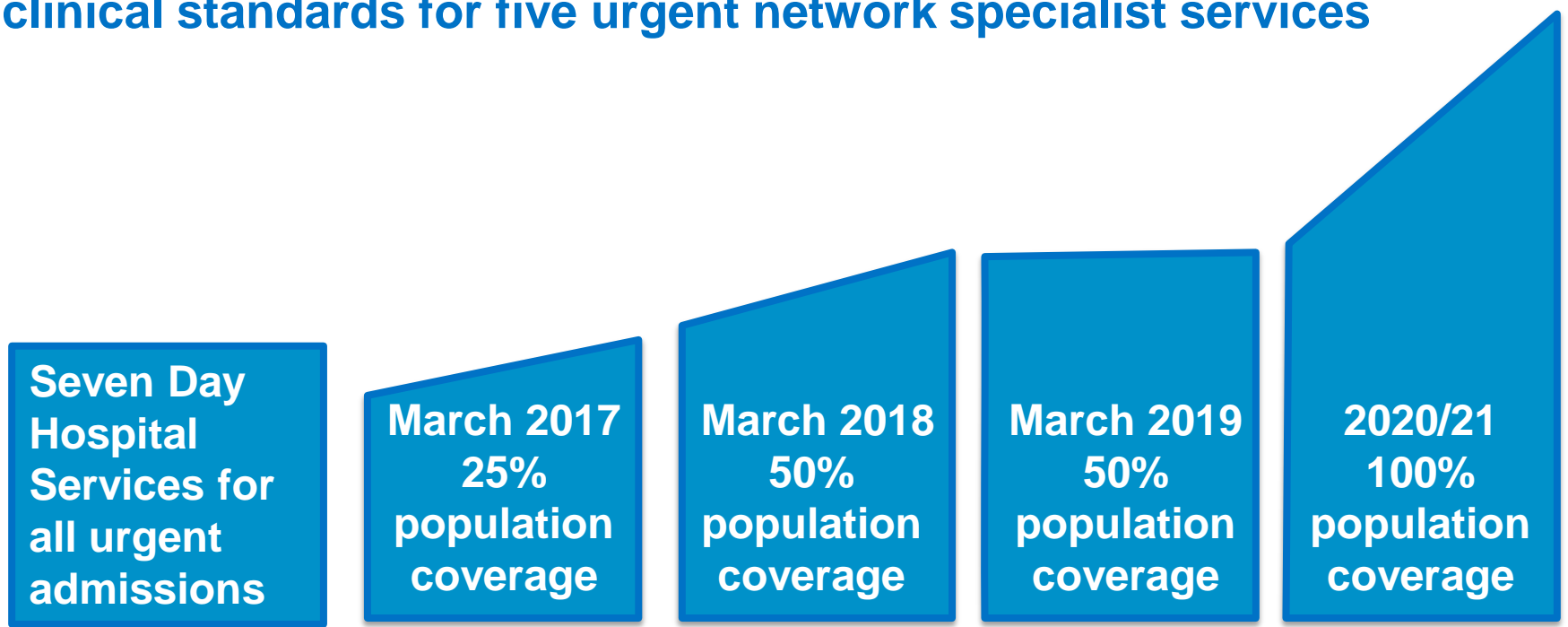
- Standard 2: **Initial consultant review**
- Standard 5: **Diagnostics**
- Standard 6: **Consultant directed interventions**
- Standard 8: **Ongoing daily consultant-directed review**

### Clinical standards which enable sustainable delivery

- Standard 1: **Patient Experience**
- Standard 3: **MDT Review**
- Standard 4: **Shift Handover**
- Standard 7: **Mental Health**
- Standard 9: **Transfer to primary, community and social care**
- Standard 10: **Quality Improvement**

- The 10 clinical standards were developed by the NHS Services, Seven Days a Week Forum led by Professor Sir Bruce Keogh.
- Priority standards are those identified as the minimum set of clinical standards needed to tackle variation in outcomes, patient flow and experience. Selection is supported by the Academy of Medical Royal Colleges.

Implementation of the four priority standards is taking place through to 2020/21, with a parallel programme to deliver 7DS clinical standards for five urgent network specialist services



Seven Day Hospital Services for urgent network services

March 2019  
100% population coverage for 5 urgent network services

- Urgent network specialist services:
- Emergency vascular
  - Hyperacute stroke
  - Major trauma
  - STEMI Heart attack
  - Paediatric intensive care

## The latest set of results from the March 2018 survey show a third of trusts are now meeting all four priority standards

- The latest analysis suggests that 49 trusts are now meeting all four priority standards. This equates to 32.98% population coverage. Table 1 below shows the full details of trusts' standard achievement.

Table 1: Number of trusts achieving 7DS standards and population coverage, March – April 2018

	Total number of trusts achieving 7DS priority standards over a seven day period	% of Population covered by these trusts
4 standards	49	32.98%
3 standards	97	68.06%
2 standards	130	90.16%
1 standard	144	98.33%

Note: Trusts covering 0.98% of the national population did not submit results for this survey and trusts covering 0.69% of the national population failed to achieve any standards.

## Analysis of results for clinical standard 2 (first consultant review within 14 hours of admission) show a variation in performance from specialty to specialty

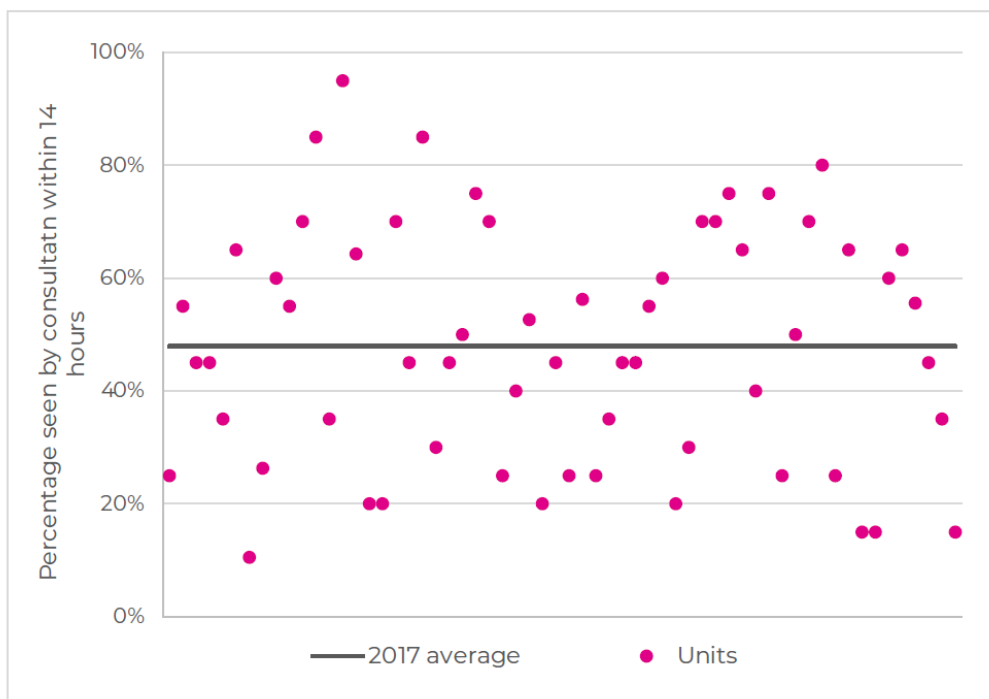
Both paediatric medicine and surgery continue to be areas of concern:

Specialty as recorded on survey	% compliance 2018	% compliance 2017	Change
Intensive Care Unit	95.20%	85.44%	9.76%
<b>Paediatric intensive care unit (PICU)</b>	<b>91.90%</b>	<b>88.46%</b>	<b>3.44%</b>
Cardio-thoracic Surgery	90.50%	67.21%	23.29%
Ophthalmology	88.90%	81.48%	7.42%
Diabetes and Endocrinology	87.30%	69.80%	17.50%
Acute Internal Medicine	84.90%	79.85%	5.05%
Stroke Medicine	84.80%	76.67%	8.13%
Respiratory Medicine (Thoracic Medicine)	84.00%	79.74%	4.26%
Geriatric Medicine	84.00%	77.91%	6.09%
Renal Medicine (Nephrology)	83.60%	60.82%	22.78%
Gastroenterology	83.50%	71.89%	11.61%
Cardiology	82.10%	76.18%	5.92%
Emergency Medicine	80.60%	68.24%	12.36%
Infectious Diseases	80.00%	76.27%	3.73%
Palliative Care	78.60%	69.23%	9.37%
Rheumatology	78.10%	82.93%	-4.83%
Neurosurgery	76.10%	63.56%	12.54%
Vascular Surgery	75.40%	63.25%	12.15%
Neurology	75.00%	61.25%	13.75%
Trauma and Orthopaedic Surgery	74.60%	63.07%	11.53%
General Surgery	73.10%	60.90%	12.20%
<b>Paediatric Surgical Wards</b>	<b>73.10%</b>	<b>63.72%</b>	<b>9.38%</b>
Haematology	72.40%	58.90%	13.50%
<b>Paediatric Medicine</b>	<b>70.90%</b>	<b>66.89%</b>	<b>4.01%</b>
Other	69.80%	66.95%	2.85%
Obstetrics and Gynaecology	64.50%	55.68%	8.82%
Oncology	61.10%	55.42%	5.68%
Urology	58.80%	50.90%	7.90%

# The results from Facing the Future's 2017 Audit for Standard 3 (consultant review within 14 hours of admission) show a lower level of compliance

- The RCPCH's 2017 Audit, published in March 2018, shows that 48% of children admitted to the paediatric department with an acute medical problem were reported as being seen by a consultant paediatrician within 14 hours of admission.

Table 3: Percentage of children seen by a consultant within 14 hours of admission



## Trusts that have been successful in delivering the 7DS standards have taken a range of steps for all specialties

### Staff rotas and working practices

Ensure acute take consultant presence from 8am to 8pm every day (especially for high volume specialties).

On high volume units such as most AMUs use rolling ward rounds through the day to keep up with the new patients arriving.

### Best clinical practice

Write into policy the expectation that patients admitted before 8pm will be seen by the evening take consultant before he/she goes home.

Ensure that handover lists used for take ward rounds include time of arrival, admission and ward for all patients to support the on take consultant to prioritise the order in which they see patients on the ward rounds.

### Effective recording

Ensure that entry in the medical notes makes clear that consultant is assessing the patient and the time.

Ensure patients assessed by an appropriate consultant in ED or in clinic prior to admission to hospital are recorded as meeting the standard.

### Clinical Engagement

Ensure that all team members, particularly junior doctors and senior ward nurses know the importance of a prompt consultant assessment for new and undifferentiated patients

Senior staff demonstrate commitment to the aims of the 7DS programme