Agenda Item: 3vi

Report to:	Board of Directors	Date: 1 August 2019
Report from:	Medical Director	
Principal Objective/ Strategy and Title:	GOVERNANCE: Seven Day Services Board Assurance	
Board Assurance Framework Entries:	Unable to provide safe, high quality care	
Regulatory Requirement:	7 Day Services Standards	
Equality Considerations:	None believed to apply	
Key Risks	Non-compliance resulting in failure to meet our patient access targets	
For:	Information	

1. Purpose/Background/Summary

The 7 Day Hospital Services Programme (7DS) has introduced a new measurement system based on board assurance of the four priority clinical standards to replace the 7DSAT online survey tool previously used. The intention is to ensure trust board oversight of 7DS and to reduce the administrative burden on trusts. The four priority clinical standards are:

Standard 2: Time to initial consultant review

Standard 5: Access to diagnostics

Standard 6: Access to consultant-led interventions

Standard 8: Ongoing daily consultant-directed review

Clinical Standard 2 – First Consultant review within 14 hours

Assessments based on a triangulation of consultant job plans to deliver 7DS, local audits to provide evidence and reference to wider metrics.

Clinical Standard 6 – Access to consultantled interventions

As previously, assessment based on weekday and weekend availability of nine interventions on a 24-hour basis, either on site or by a formal arrangement with another provider.

Clinical Standard 5 – Access to consultantdirected diagnostics

As previously, assessment based on weekday and weekend availability of six diagnostic tests to appropriate timelines, either on site or by a formal arrangement with another provider.

Clinical Standard 8 – Ongoing consultantdirected review

Assessment based on consultant job plans to deliver 7DS, robust MDT and escalation protocols, local audits and reference to wider metrics.



The NHS Standard Contract will require providers to undertake the 7DS board assurance process bi-annually. The results from this will form a 7DS metric in the clinical commissioning group improvement and assessment framework to allow CCGs to assess local delivery of 7DS.

The Trust carried out a 7 day audit of emergency admissions between $15^{th} - 21^{st}$ May 2019, consisting of 25 patients who met the required criteria. The data submitted is currently undergoing validation although I can report that the Trust has met Clinical Standards 5 and 6 and further investigation required for Standards 2 and 8. I propose to bring this information to the Board in September.

Recommendation:

The Board of Directors is requested to note the contents of this report