

## Case Study: 7 Day Services



*Hospital Trusts around the country are facing the challenge of introducing 7 day services. Respiratory Colleagues are often at the forefront of developing new and innovative solutions to ensure that patients receive respiratory care of the highest standard.*

**Dr Paul Stockton and Dr Simon Twite, Consultant Respiratory Physicians at St Helens and Knowsley Teaching Hospital NHS Trust, explain how their hospital has approached the issue.**

*“Since introducing this way of working we have seen significant reductions in our length of stay”*

### Background

St Helens and Knowsley Teaching Hospitals NHS Trust has been running a 7 day service since 2014. To facilitate the change to 7 day working the Trust invested in 3 additional consultant respiratory posts. This increased the total number of posts from 4 to 7.

### Setup

There are 2 respiratory wards. Each ward has 33 beds and 3 consultants; who do 3 ward rounds and 2 board rounds a week. This ensures that patients are either seen in person, or virtually, by a consultant every day. The post-take & acutely unwell patients are seen by consultants on board round days. The remaining patients are discussed on the board round days. They are then reviewed in person by the junior doctors.

At the weekend consultants still contribute to a 1:14 general medicine on-call rota. They are available to provide telephone advice for general medicine issues. During the week there is a separate general medicine on-call rota that all consultants participate in.

### Slow Drift Model

The consultants' work pattern rotates every 7 months in what we have named the “*Slow Drift Model*”. This means that for 1 month in 7, each consultant has no inpatient activities but has additional outpatient commitments.

### Weekend Respiratory service

The weekend respiratory service has each consultant working 1 in every 8 weekends. This work equates to 2 PAs (sessions). All patients are included in a board round and patients are physically seen for a variety of different reasons, for example: patients who have been reviewed by the MET team overnight; new patients to the ward; patients that have been identified by other colleagues as requiring a consultant review.

### Annual Leave and Cross-cover

When a consultant is on annual leave, or study leave, for 3 days (or 2 consecutive ward rounds) cross cover applies and the remaining consultants cover their absent colleague. Only 1 consultant is able to be off for 3 days or more on any ward. This means that all patients are reviewed by a consultant, unless that consultant is absent for 2 days or less.

### Additional Staff

There is one FY1 doctor who is designated to accompany consultants on weekends and a dedicated ward-round nurse for each ward. The Trust has also invested in additional radiology services, to enable more imaging over a weekend. They have also provided a weekend phlebotomy service and increased pharmacy support.

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