

West Midlands Clinical Senate

Shrewsbury and Telford Hospitals Emergency Department Overnight Closure Princess Royal Hospital, Telford

ADDENDUM to the Clinical Advice Report (November 2018)

First published: November 2018
Updated: (only if this is applicable)
Prepared by: West Midlands Clinical Senate
Classification: OFFICIAL

This information can be made available in alternative formats, such as easy read or large print, and may be available in other languages, upon request. Please contact Katy Wheeler, Clinical Senate Administrator at katy.wheeler@nhs.net or on 01138 255 538

(Terms of Reference, Confidentiality agreements and Declaration of Interest as per SaTH Clinical Senate Review 17th October 2018)

Following your request for a clinical senate opinion for the revised times for overnight closure of the above mentioned; the clinical senate panel have now reviewed the documentation sent by SaTH and considered the verbal update and discussion by the SaTH team via teleconference on 14th November 2018; and have formed the following clinical opinion in that we cannot support this changed closure time proposal at this stage. Our concerns are summarised in the following 4 areas:

1. Revised Overnight Closure

The panel agreed that re-visiting the closure time from 8pm until 10pm was important based on local population and system needs and pressures, as the review undertaken in October 2018 identifies approximately one third of the current overnight activity arrives between 8pm and 10pm (WM CS SaTH Report 2018).

2. Staffing and Rotas

The panel is of the opinion that further assurance is needed that the clinical body of ED Consultants at both PRH and RSH support the proposed changes individually and collegiately, and they have been given the opportunity to voice any concerns relating to the proposed model, and that evidence of consultant colleagues support or otherwise is available for reviews as part of the evidence pack

The panel was concerned around the proposed Middle Tier Rotas (Option 2 SaTH 2018) and were of the opinion that option 2 (24hours per 14 hour period of opening) represented the lower end of the range for safe and sufficient middle grade clinical cover. The panel agreed and recommended that option 1(32 hours per 14 hours of opening) should be the preferred option for middle grade cover.

The panel was concerned at the level of reliance on nursing bank/agency posts. The panel recommends that the Trust establish a policy of what would be the minimum number(s) for directly employed staff and the proposed level of agency / bank staff, and any risk and mitigation established should these fall below the minimum levels. The recommendation though relating to nursing applies equally to all clinical rotas.

The panel was concerned with regards to the availability of one member of staff trained in APLS at the Royal Shrewsbury Hospital at night. The panel was of the opinion that further capacity building was required to upskill adult ICU staff with APLS qualifications in order to ensure that more than one trained member of staff was available at all times.

The panel was concerned to ensure that staffed, booked and filled clinical rotas would be available in advance of the intended opening of the new service (currently planned for 5th December 2018) and that they should be available at least 4 weeks ahead for assurance, particularly given the stated difficulties in staffing and recruitment.

3. Clinical Pathways

The panel was concerned that the clinical pathways were complex and may not work in complex combination on occasion for partners, especially for WMAS paramedic crews. The panel recommends that further engagement is undertaken with WMAS and representation from WMAS is included in the clinical pathway stakeholder group.

The panel identified a clinical risk for those patients for patients having to bed down in overnight in ED after closing at 22.00hrs at PRH, Telford. Medical cover will be provided by 'on unit staff,' there will be no medical cover for ED. There is also a concern that bedding down in ED will become a routine rather than the exception. The panel recommends monitoring from regulatory colleagues and that the CQC robustly monitor bedding down of patients in ED for the first six weeks and make an assessment.

The panel have received SaTH's Aggregated Patient Delay Data; however an additional request is made to see it separated by site as this is crucial in determining the level of stress at the RSH site.

Following the panel teleconference (14th November 2018) a further concern was raised regarding untoward incidents or the clinical risk escalation process. The panel recommends that an immediate response will be needed and acted upon internally by the relevant medical director.

4. Communications

The panel agreed that the issues reported in the previous report (WM CS SaTH Report 2018) have been addressed in that there are planned stakeholder meetings over the coming weeks, providing clarity around the overnight closure times with patients, public and professionals, especially clear and visible public signposting of finalised opening times.

In summary, the clinical senate have a number of concerns regarding the overnight closure (20:00 - 08:00) of ED, PRH, Telford; these are highlighted in the WM CS SaTH Report (2018). The concerns are further heightened with the proposed overnight closure (22:00 - 08:00) as stated above.

The clinical senate is unable to support the revised overnight closure at PRH Telford based on the current assertions, with a particular focus around staffing and rota concerns. The senate will be happy to reconsider the proposal once the recommendations have been met from the WM CS SaTH report (2018) and the clinical advice contained in this letter.

Please contact Angela Knight Jackson, Head of Clinical Senate if you require any further information.

The Clinical Senate looks forward to continuing to work with you to ensure the best option of ED care for the population served by SaTH.

Produced by:

West Midlands Clinical Senate
St Chads Court, 213 Hagley Road, Edgbaston, Birmingham, B16 9RG, United Kingdom
Tel: +44 (0)113 825 5538
Email: england.wmcs@nhs.net
Date: November 2018