

# Health and Social Services Committee

**HSS(2)-10-06(p10)**

**Meeting date: Thursday 15 June 2006**

**Venue: Committee Room 3, Senedd, National Assembly for Wales**

**Title: Update on the 'Hospital at Night' projects**

## **Purpose**

Paper to Note Hospital at Night implementation in NHS Trusts throughout Wales.

## **Summary**

55% of NHS Trusts in Wales have some form of Hospital at Night model running.

## **Background – Hospital at Night**

The Hospital at Night model proposes that the way to achieve effective clinical care at night is to have one or more multidisciplinary teams working in the hospital, who between them have the full range of skills and competencies to meet patients' immediate needs.

The project was born out of an original idea by Dr Elizabeth Paice, Postgraduate Dean Director for London, who was concerned by the adverse effects on patients and junior medical staff of traditional models of night time working.

In August 2000 the timetable was set to incorporate junior doctors within the provisions of the European Working Time Directive (EWTD). This timetable means that it has become imperative to reduce the working hours of junior doctors to meet the hours for the maximum working week. This has resulted in a move to full shift working and provided added impetus to change traditional medical working practices out of hours. The Joint Consultants Committee (JCC – comprising representatives of the Academy of Royal Colleges and the BMA) identified, in December 2002, that a move to multidisciplinary, competency-based working, could help hospitals achieve EWTD compliance.

The Hospital at Night project is not part of the EWTD but is one way of addressing the issue.

The implementation of H@N within Trusts in Wales has the full backing of the Welsh Assembly Government and is being overseen by the Junior Doctor Co-ordinators. Support to trusts is offered via the Hospital at Night Network Welsh Assembly Government (HANNWAG) group which meets

bimonthly to discuss issues and problems within trusts.

As part of the HANNWAG group trusts were encouraged to take on "mini pilot" projects. These projects were approved by the Junior Doctor Co-ordinators and funding made available. Findings from the mini pilots will be feedback to the HANNWAG group and will be presented in a poster format at the forthcoming All Wales Hospital at Night Conference on 8th June as well as being made available via the Hospital at Night Internet site.

In March 2006 it was agreed that formal feedback on a quarterly basis was required on how trusts were progressing with Hospital at Night. The first quarterly report shows that 55% of trusts have developed and implemented a Hospital at Night model. The majority of trusts are actively progressing with the principles of H@N, some feeling that it is more appropriate to implement phased changes rather than 'one big bang'. The junior doctor co-ordinators plan to continue to actively monitor the progress of H@N implementation in Wales and will offer support to trusts as is needed.

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