

# Impact of Change to a Seven-Day Stoma Care Service



Bird, A., Bharathan, B., Banerjea, A., Whitehead, D. and the Nottingham Stoma Care Team.

## Background

NHS England (2013)<sup>1</sup> identified the need for a seven day NHS generating headline grabbing statistics that caused a stir (fig. 1).

**Not a lifesaving service so why do seven days?**

The NHS Group, Department of Health (2014)<sup>2</sup> set out the NHS Outcomes Framework for 2015/16 and outlined 5 goals (fig. 2). Whilst stoma care can have little influence on preventing people from dying prematurely, it can contribute to enhanced quality of life for the ostomist, help the ill ostomist recover and contribute to providing a positive inpatient experience in a safe environment. So actually stoma care can contribute towards achieving 4 out of the 5 targets.

## What should a high quality stoma service offer?

Whilst a five day service can offer clinical and cost effectiveness in a safe and relatively accessible manner, all of these attributes of a high quality stoma care service (fig. 3) can be improved by the introduction of a seven day service. Furthermore, a seven day service addresses the issue of equitability so that all patients can receive stoma care from a nurse specialist every day of their education period regardless of the day of their operation.

## The Process...

- Funds secured for more staff including secondment for band 3 HCA
- Colorectal cancer nurses and stoma care team split
- Trial of weekend working from September 2015 to February 2016 aimed at:
  - Discharging Enhanced Recovery After Surgery patients
  - Preparing others close to discharge
  - Emergency stoma siting service.
- Data from trial period compared to same period a year earlier

## Results

- More stoma formed in 2014/15 (154 v 124)
- More females in 2014/15 (52% v 46%, fig. 4)
- More cancer diagnoses in 2014/15 (51% v 45%, fig. 5)
- More ileostomies than colostomies in both periods (fig. 6)
- Similar average age in both periods (fig. 7)
- Similar ratio of operative urgency in both periods (fig. 8)
- Less laparoscopic operations recorded in 2015/16 - missing details assumed to be open so this is likely to be inaccurate (fig. 9)
- Mean length of stay almost 3 days less in 2015/16 (16.1 days v 19 days, fig. 10)
- Proportion of patients discharged by day 5 in both periods similar (around 18%, fig. 11) below the national average for all bowel cancer operations of 24-40% (National Bowel Cancer Audit Report, 2015)<sup>3</sup>
- Higher proportion of patients discharged from day 8 onwards in 2015/16 (fig. 11)
- Consistently lower mean length of stay in first 7 postoperative days in 2015/16 (fig. 12)

Figure 1: Problems with a 5-day NHS

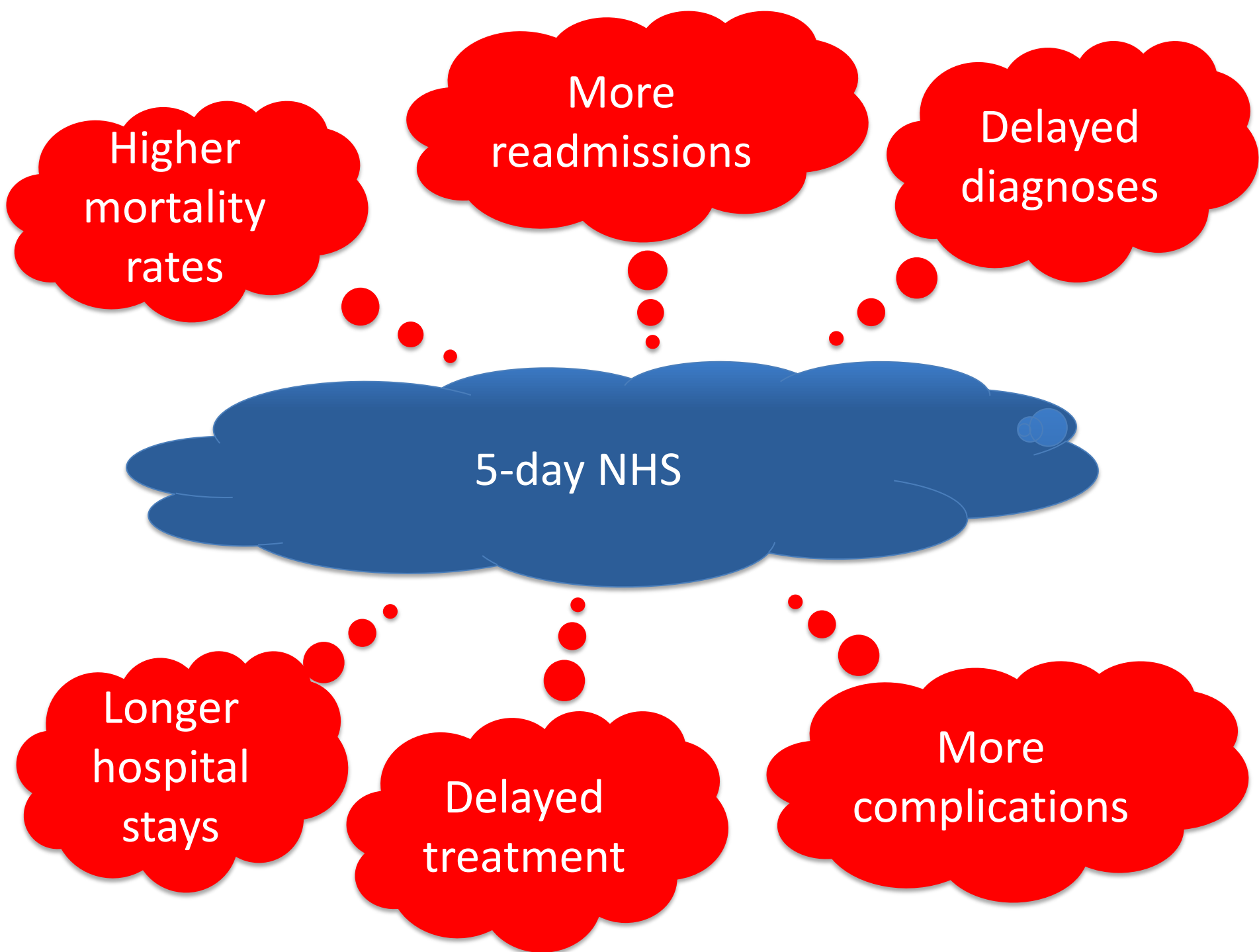


Figure 2: NHS Outcomes Framework for 2015/16

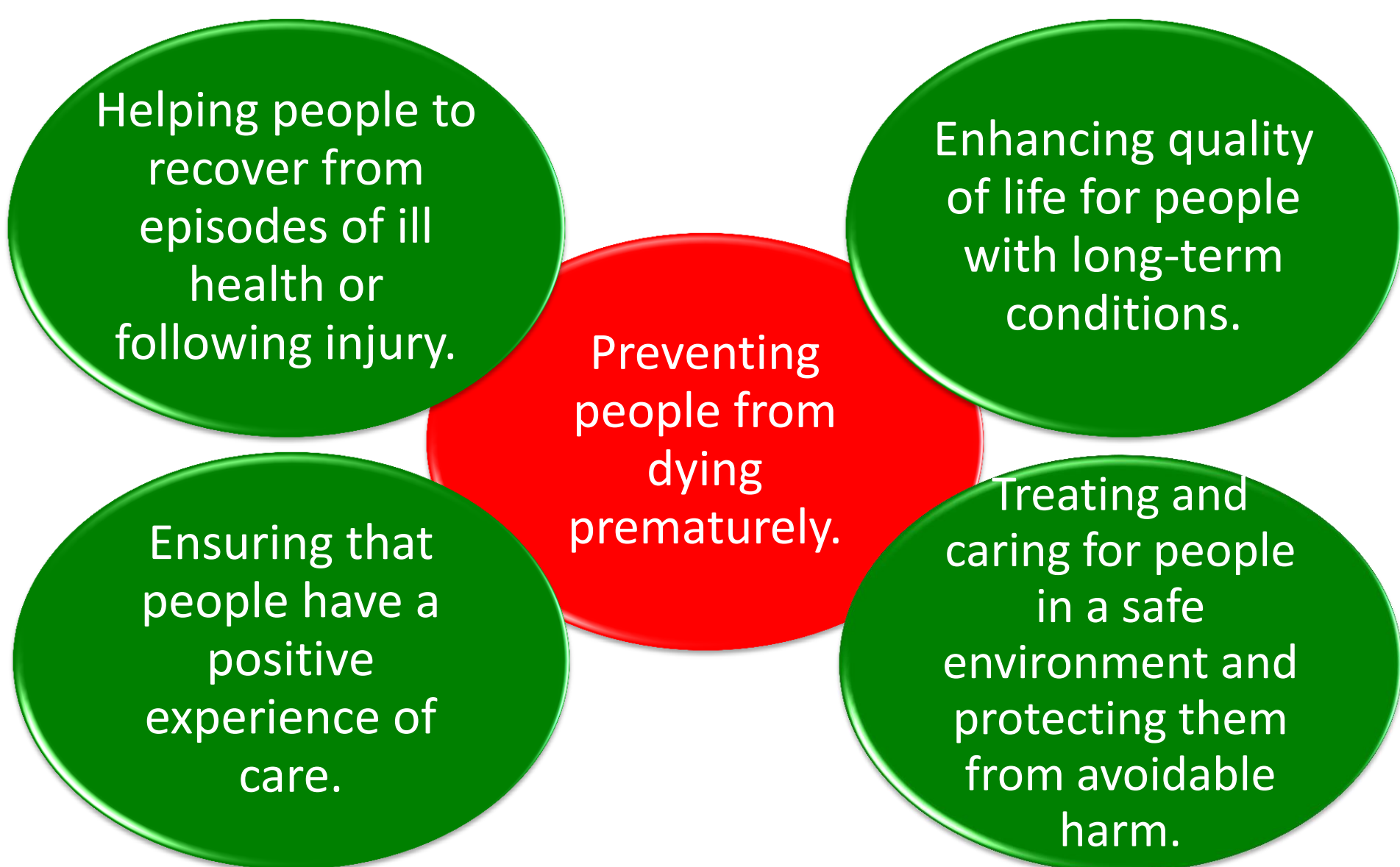


Figure 3 Attributes of a high quality service

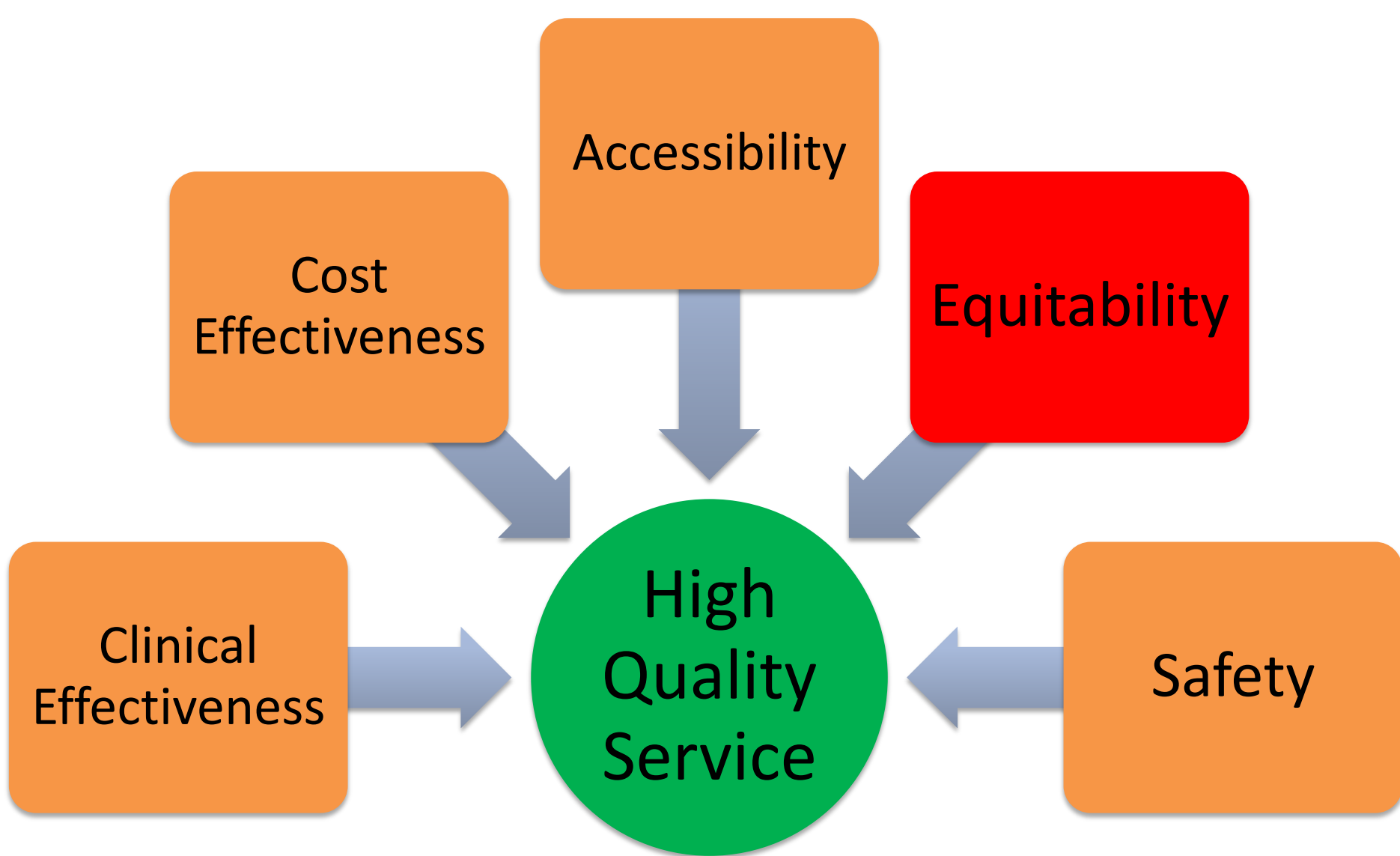


Figure 4: Gender

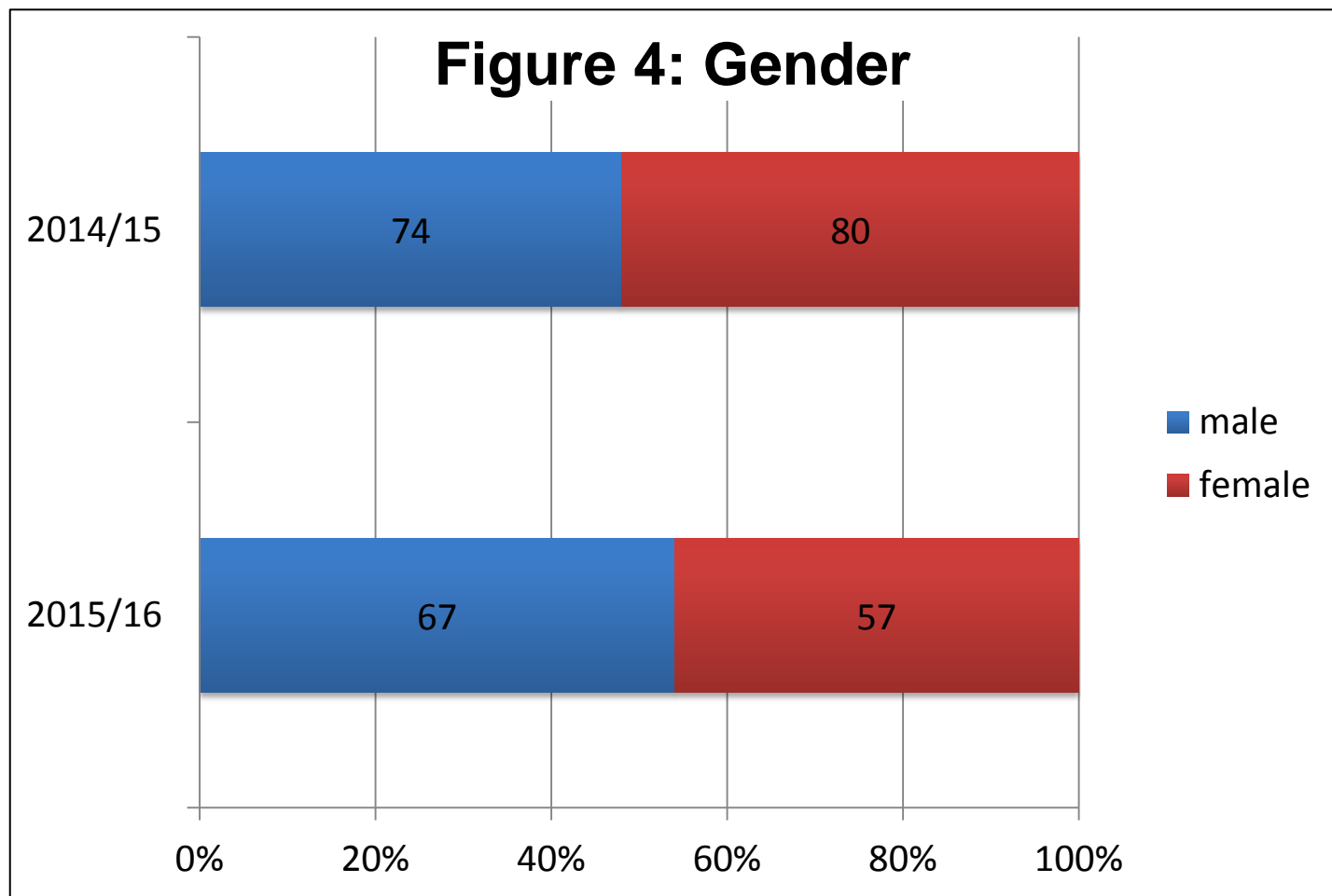


Figure 5: Diagnosis

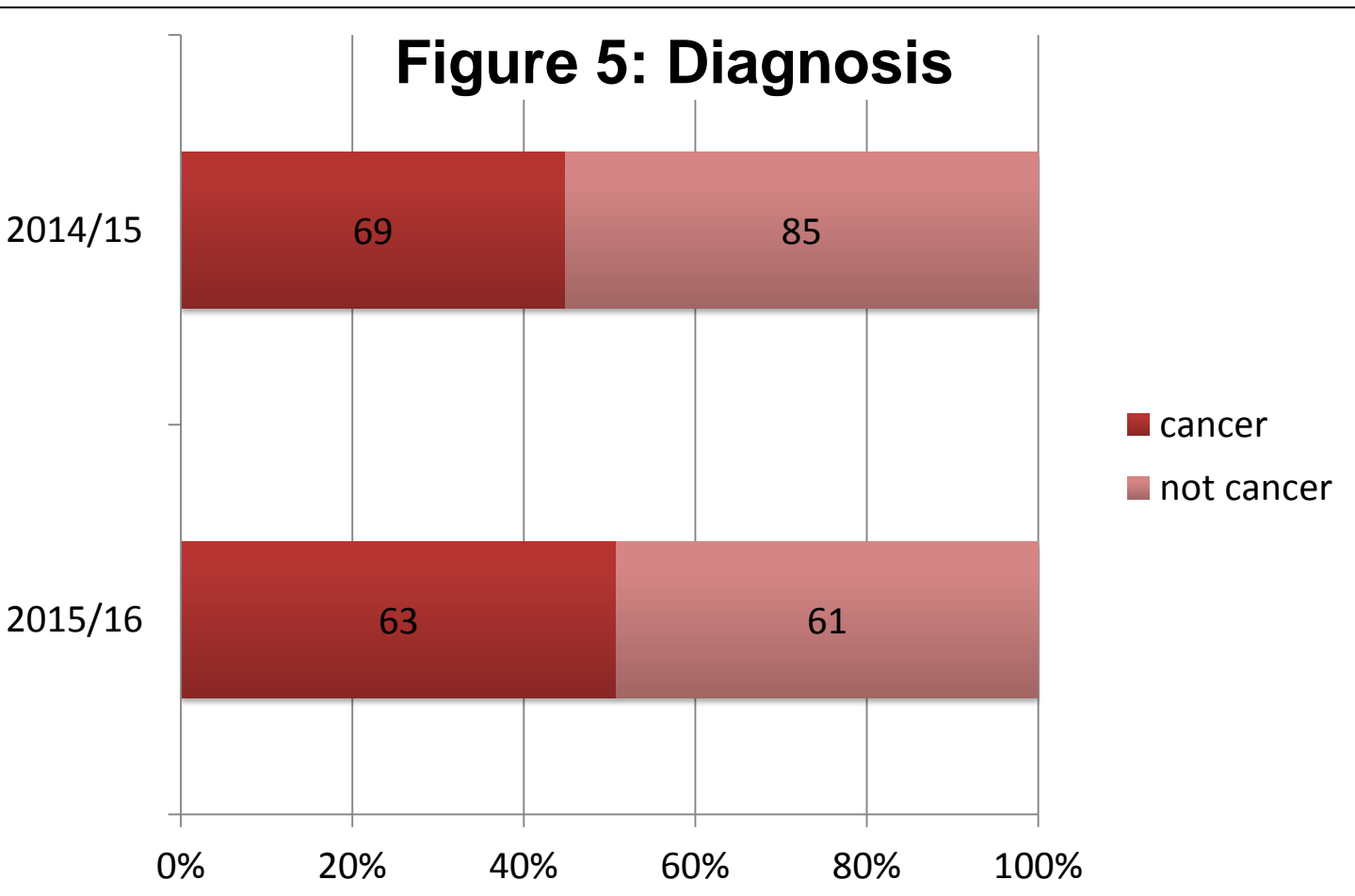


Figure 6: Stoma type

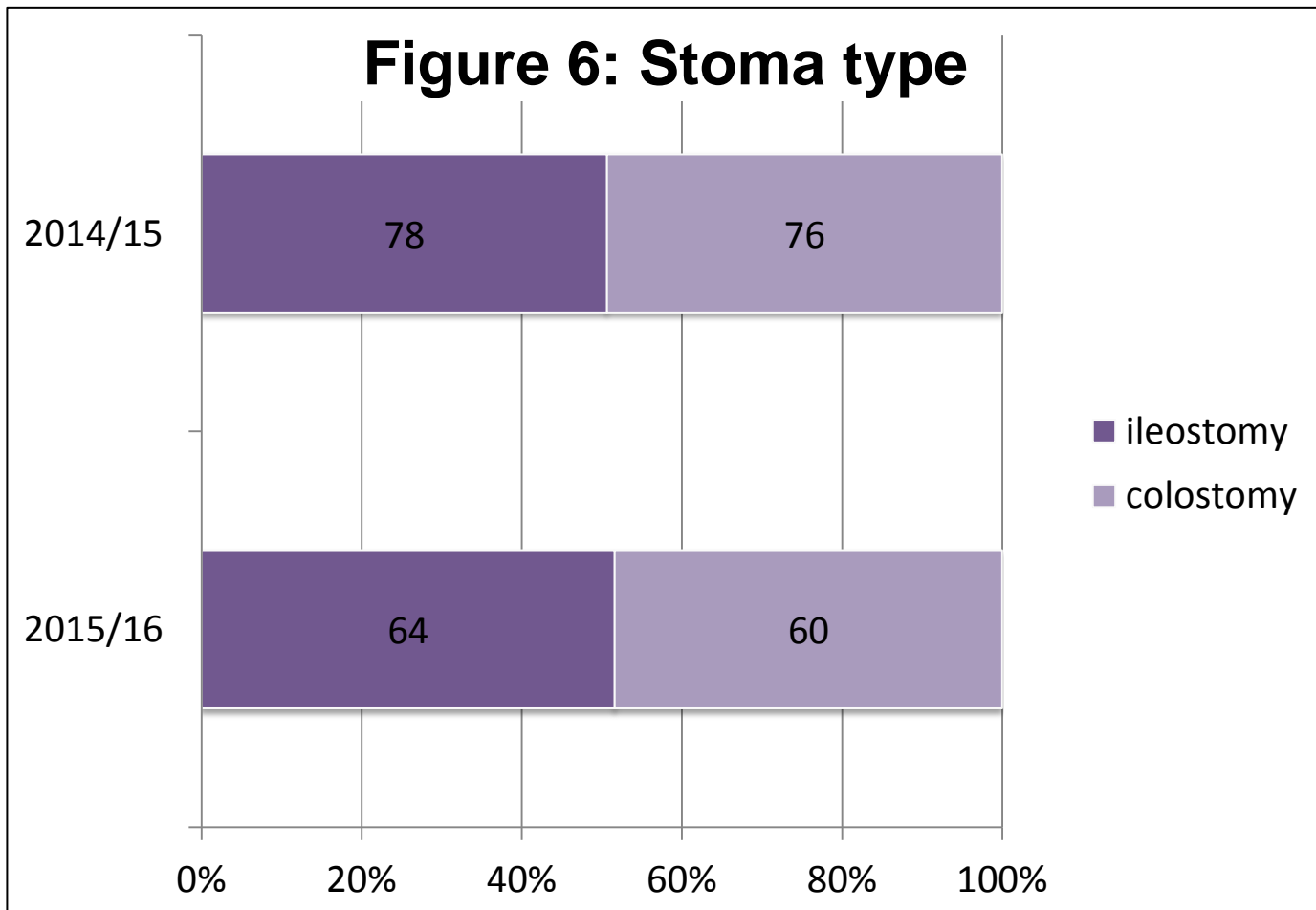


Figure 7: Average age of patients

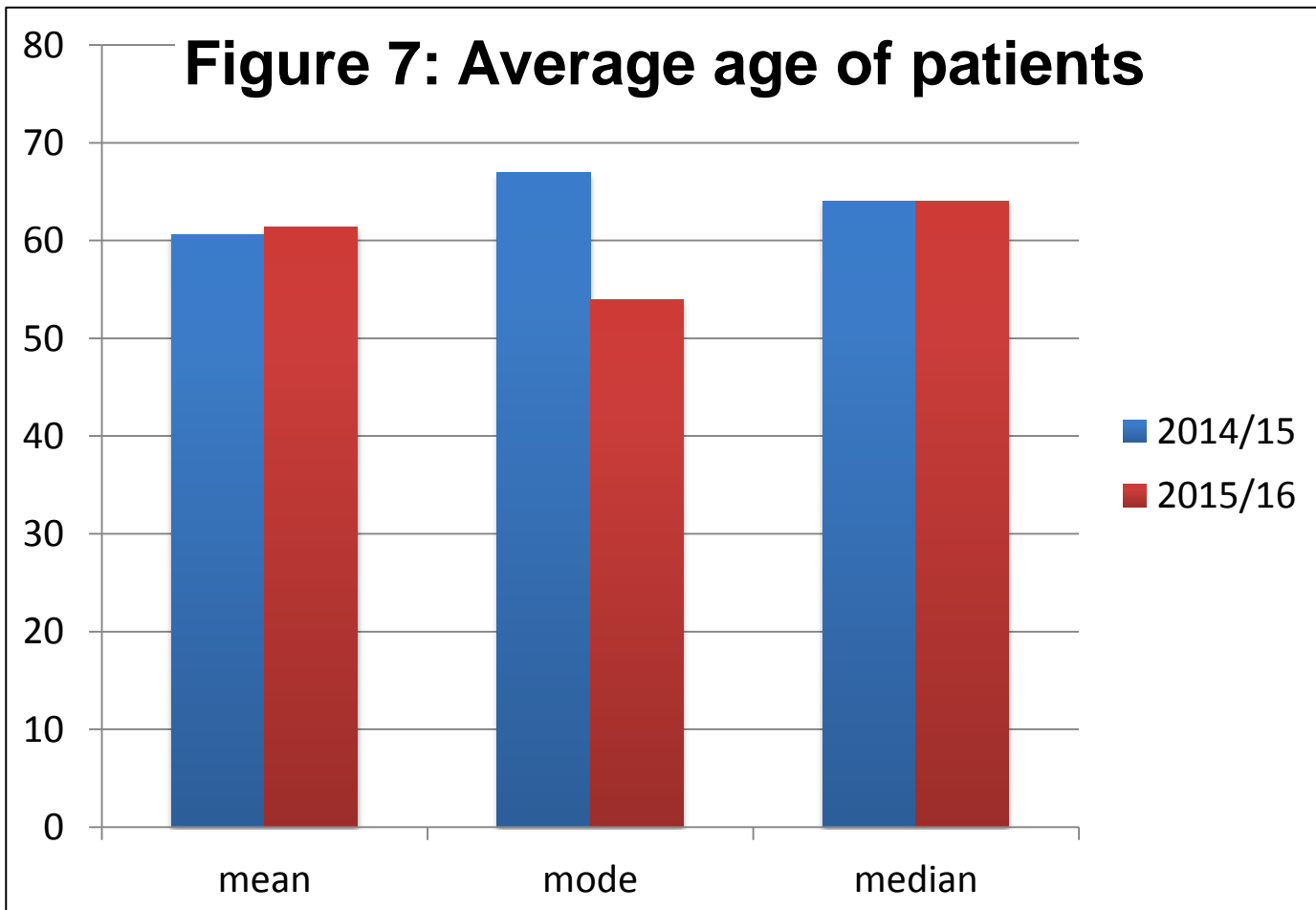


Figure 8: Operative urgency

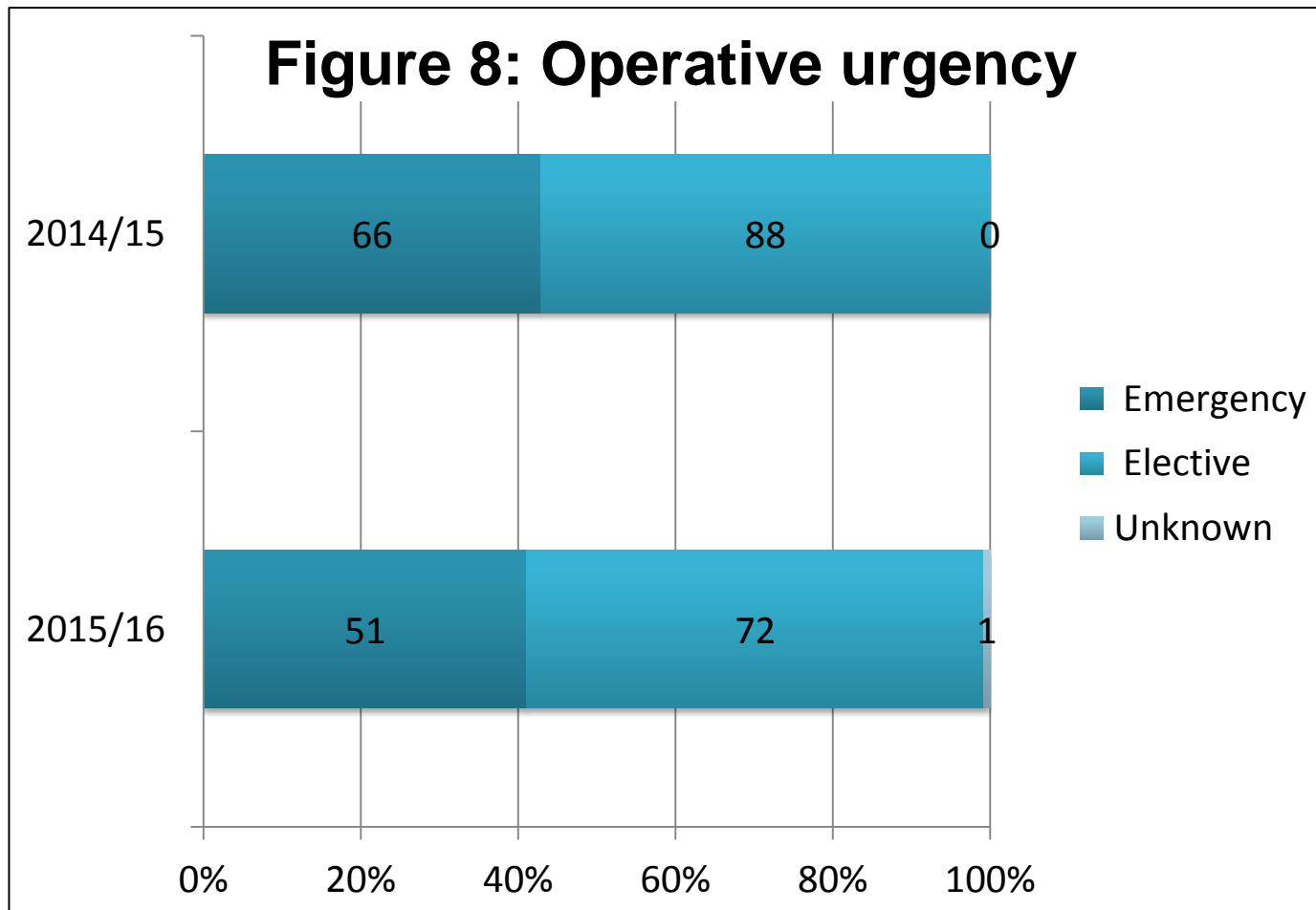


Figure 9: Surgical access

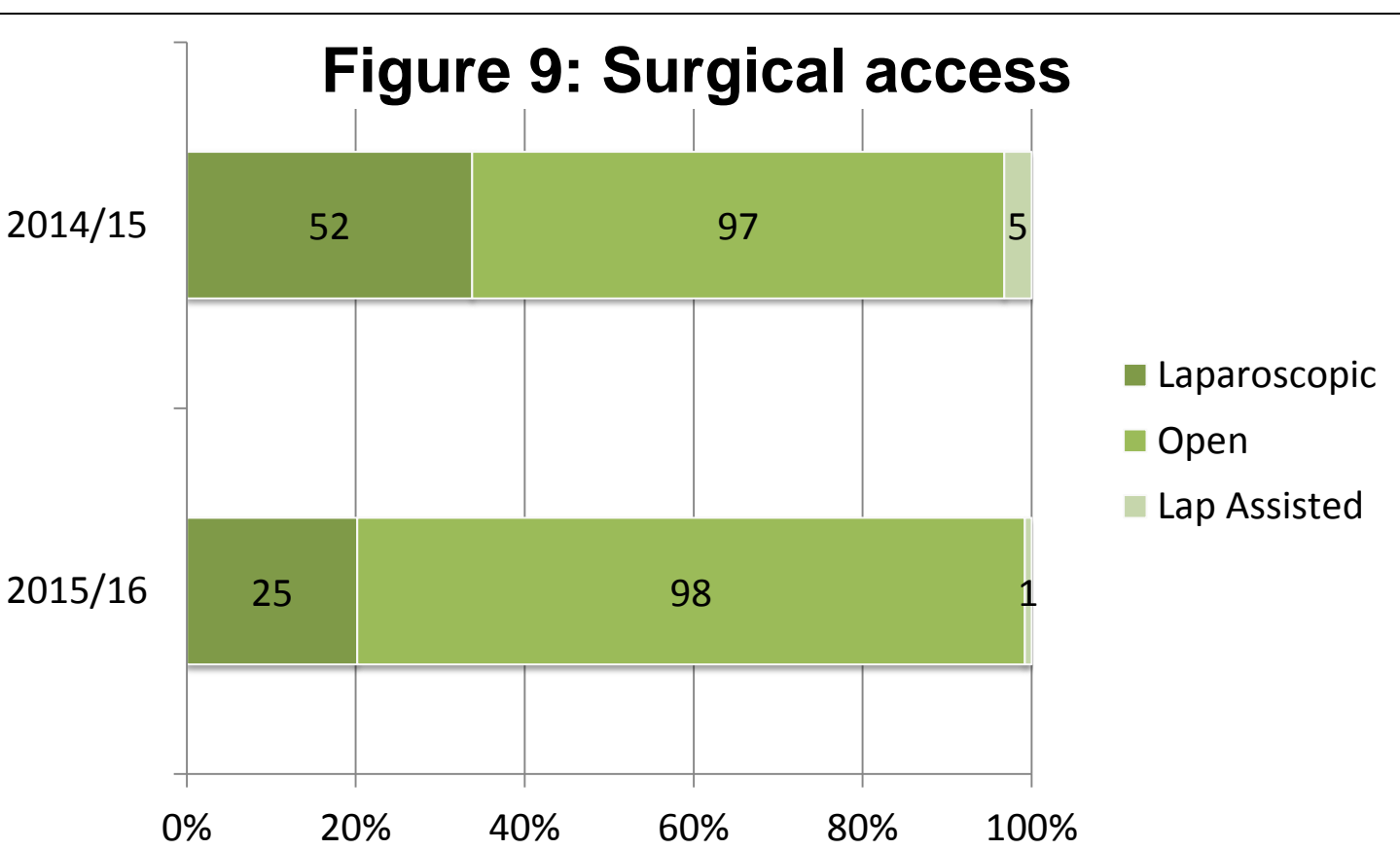


Figure 10: Average length of stay

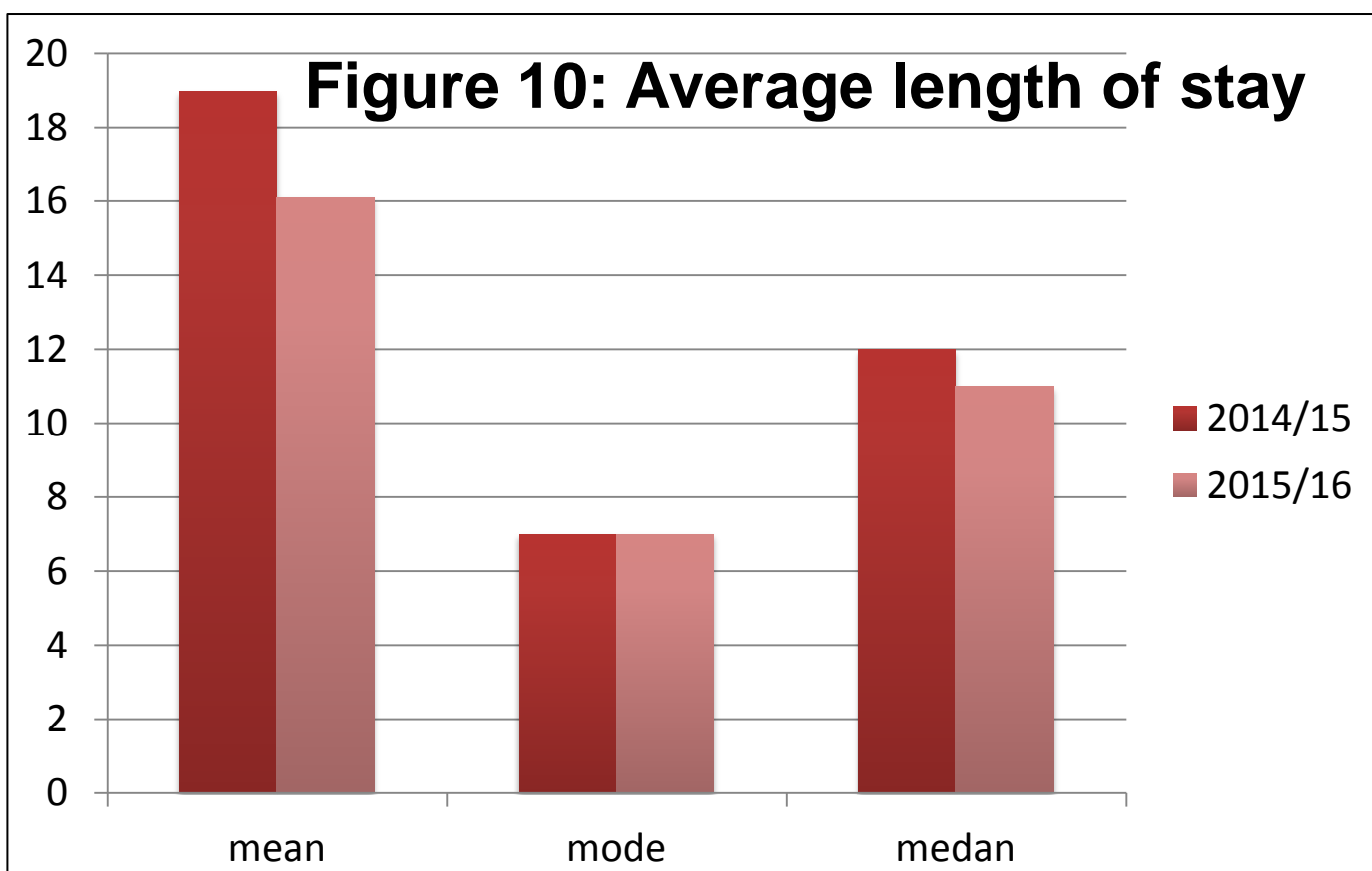


Figure 11: Proportion of patients discharged per postoperative day

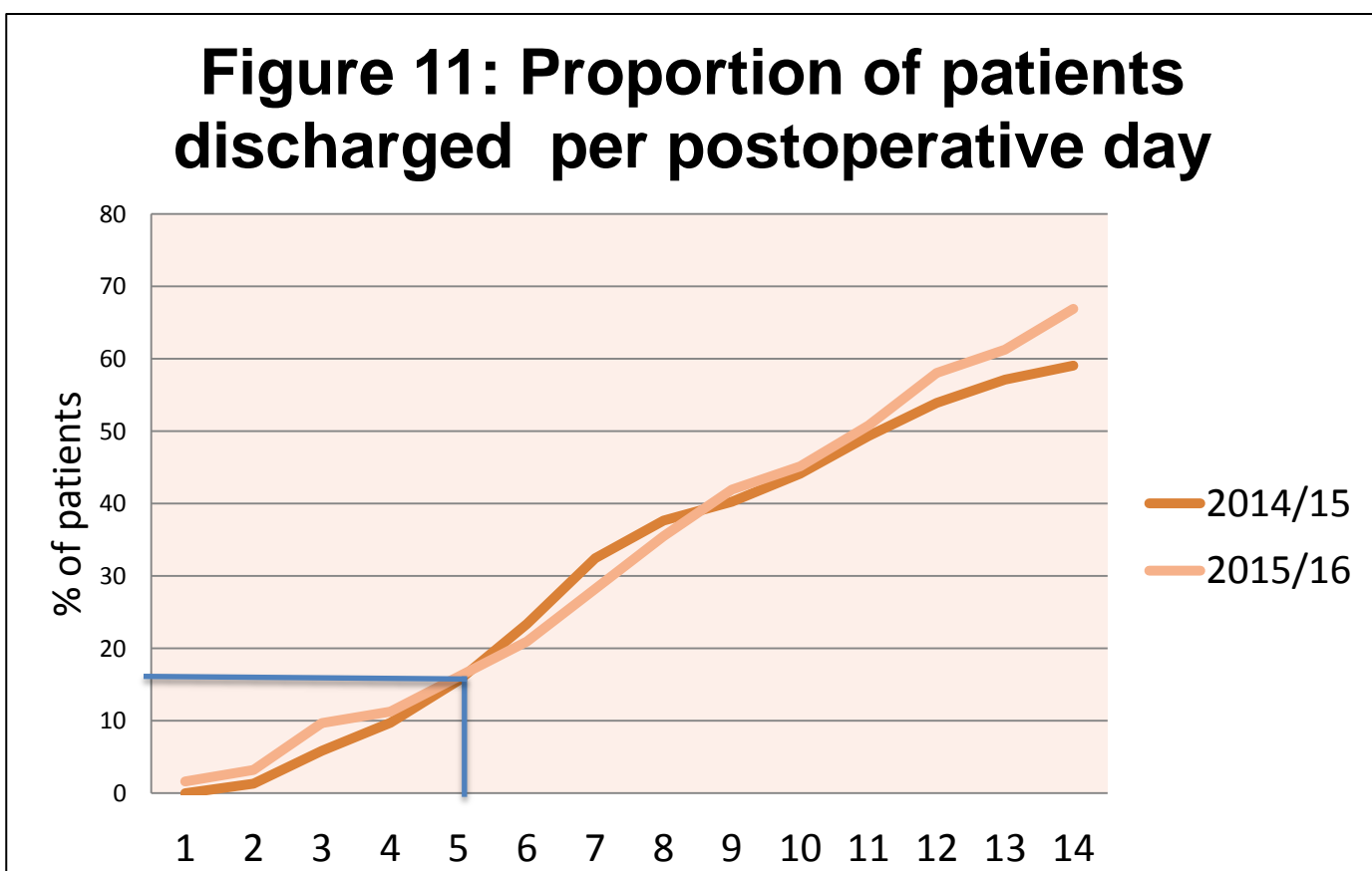
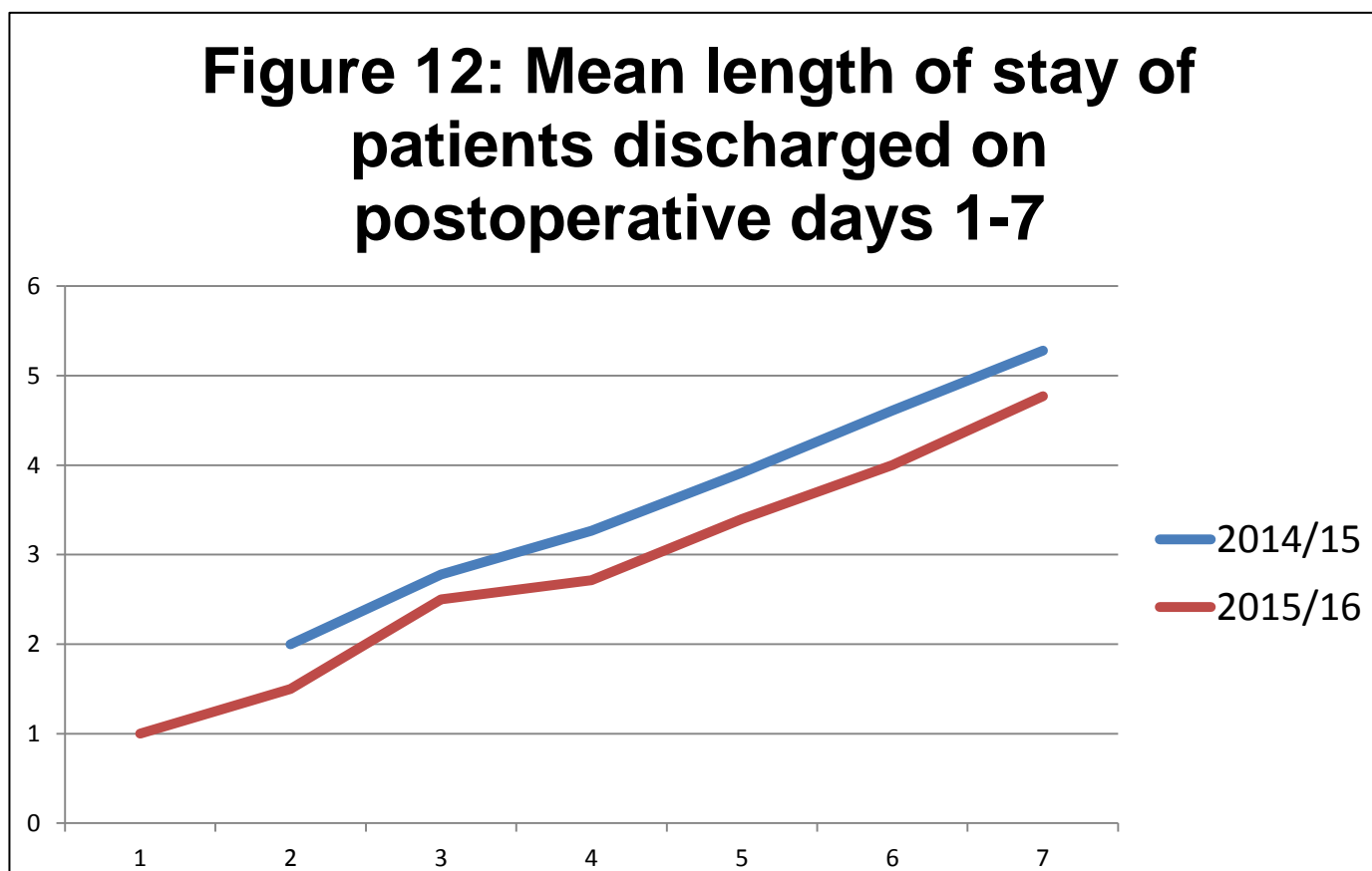


Figure 12: Mean length of stay of patients discharged on postoperative days 1-7



## References

- 1 NHS England (2013), NHS Services, Seven Days a Week Forum: Summary of initial findings at <https://www.england.nhs.uk/wp-content/uploads/2013/12/forum-summary-report.pdf>
- 2 NHS Group, Department of Health (2014), The NHS Outcomes Framework 2015/16 at [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/385749/NHS\\_Outcomes\\_Framework.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/385749/NHS_Outcomes_Framework.pdf)
- 3 National Bowel Cancer Audit (2015) at <http://www.acpgbi.org.uk/content/uploads/2016/03/nati-clin-audi-supp-prog-bowe-canc-2015.pdf>

## Financial Implications

- ❖ 124 stomas formed/alterd in 2015/16 period (135 days)
- ❖ Overall decrease in mean length of stay 2.9 days = 359.6 days saved over the trial period
- ❖ Assuming a cost of £200 per day on surgical ward, saving for the trial period > £70,000
- ❖ Cost of Band 6 to work 4 hours per day over the weekends = £1250 (1.74% of total saving)

## What do the patients think?

Statistics are useful but the real marker of a quality healthcare service is what the service user thinks.

- Patient satisfaction survey reveals that patients are very satisfied with the service they receive.
- One wrote:

"Happy it's a 7-day service so got to see stoma nurse and ask about any queries. Thank you."

- Another patient who, unfortunately, was admitted to a hospital without a weekend stoma service wrote to the patient advice and liaison service offering a powerful argument for a 7-day stoma care service:

"[I had] an emergency operation and an ileostomy on [a] Friday. I had no knowledge of stomas, so to find that stoma nurses are not available at weekends was a blow. To exacerbate that, nephrostomy bags were being used instead of stoma bags ... and mine burst both on the Saturday and Sunday. This was extremely upsetting and frightening. I was unable to get help and information until Monday morning. I had had a life-changing operation and my recovery was hampered over that first weekend by stress and anxiety. It is unfair to patients to deprive them of help just because they happened to have their operation on a Friday. I strongly urge you to consider even a short shift of stoma nurses at weekends."

## The Future...

- ❑ The findings from this initiative have been shared with stoma care teams within the region.
- ❑ NUH Stoma Care Team now offers a high quality service 8am to 4pm 365 days a year.
- ❑ New ostomists can expect a clinically and cost effective service that is accessible, equitable and safe whenever they have their operation.