

# The European Working Time Directive, Work-Life Balance, and Patient Safety

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- A 'long working hours' culture is prevalent in the UK (in 2005 the UK had the longest working week in Europe)
- Work/Life balance has often been sacrificed in favour of professional values, especially in medicine.



- The European Working Time Directive (EWTD) first appeared in 1993
- Incorporated into UK law in 1998
- '... the average working time for each seven-day period, including overtime, does not exceed 48 hours'



- Restriction of doctors' working hours was implemented gradually within the UK- an incremental reduction to 48 hours by August 2009
- NHS North West undertook a project to implement the 48 hour limit one year ahead of schedule in Aug 2008



EWTD was/is a source of major controversy in the UK

 Opinion (both professional and public) is markedly divided...



# "Patients will die if the government pursues plans to stop doctors working more than 48 hours a week..."\*



"If the 48-hour week is introduced as planned on 1 August, patient safety is going to be reduced. People are going to die because of this..."\*



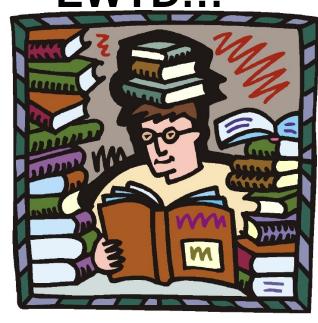
"...excessive hours of work for doctors in training are damaging to the individual doctors health, their individual safety and to patient safety."\*



# "Tired doctors are not safe doctors..."\*

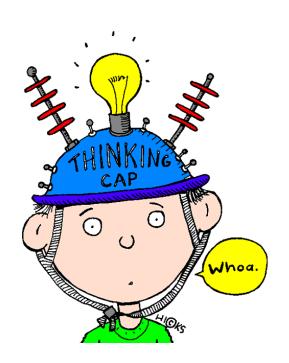


To address this debate, NHS North West undertook a study to collect objective data around patient safety and the FWTD





In August 2008, NHS North West implemented a 48 hr working week. The rest of England did not implement this limit until August 2009...





This allowed a 'window' during which parameters of patient safety in NHS North West could be compared to the rest of the country



#### **METHODS**

- Hospital Standardised Mortality Ratio (HSMR)
  - Average Length of Stay (ALOS), and
- Standardised Readmission Rate (SRR)
- > 3 financial years from 2006/2007 to 2008/2009
- > Across all acute Trusts, and all specialties
- NHS North West and National data were compared

## NHS North West

# Hospital Standardised Mortality Ratio (HSMR)

 The HSMR compares the number of expected deaths with the number of actual deaths in a ratio

observed deaths x 100 expected deaths



#### **HSMR**

The rates are adjusted to **standardise** for difference in case mix, including:

- •Sex
- Age group
- Method of admission
- Socio-economic deprivation (Carstairs Index)
- Primary diagnosis (Clinical Classification System)
- Co-morbidities (Charlson Score)
- Number of previous admissions
- Month of admission
- •Whether a patient is being treated within the specialty of palliative care.

A published methodology for calculation of HSMRs was utilised



#### Average Length of Stay (ALOS)

 Measures the average duration of all patient episodes in hospital from the day of admission to the day of discharge

Divided into *elective* and *non-elective* groups

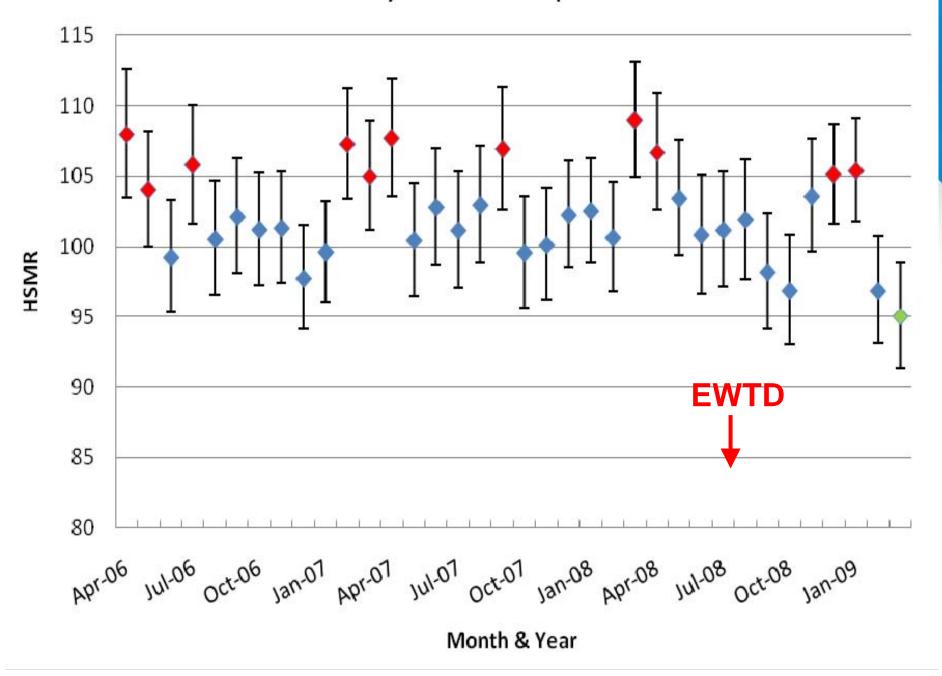
#### NHS North West

# Standardised Readmission rate (SRR)

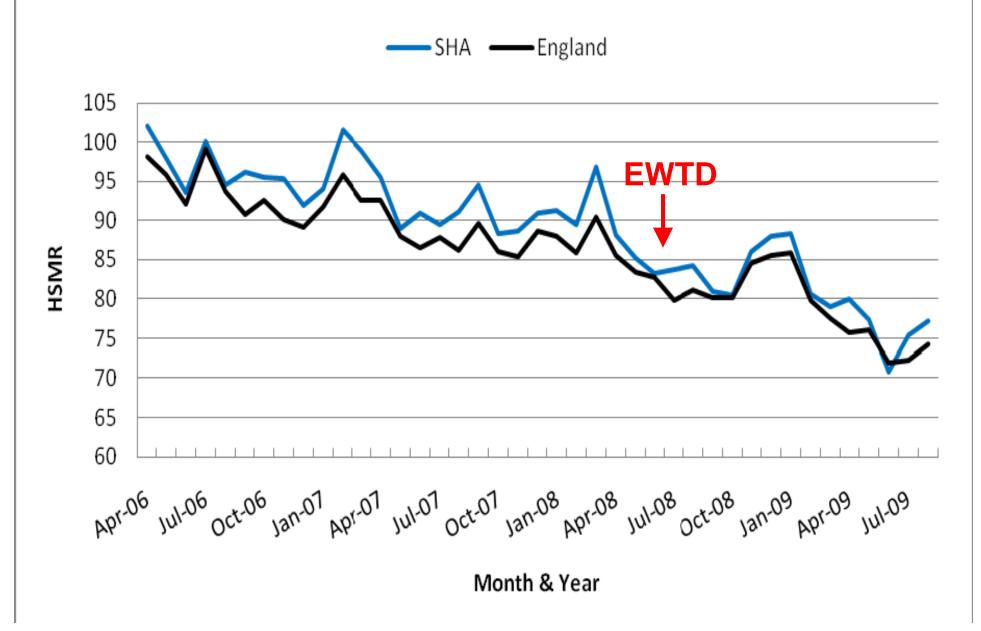
Measures the number of emergency readmissions

- ...to acute trusts within 28 days of discharge, where readmission was not part of the planned treatment.
- Standardised to account for difference in case mix in the same way as HSMRs

#### NHS North West HSMR by Month from April 2006 to March 2009



#### NHS North West & England HSMRs from April 2006 to August 2009 with 2005 Benchmarks

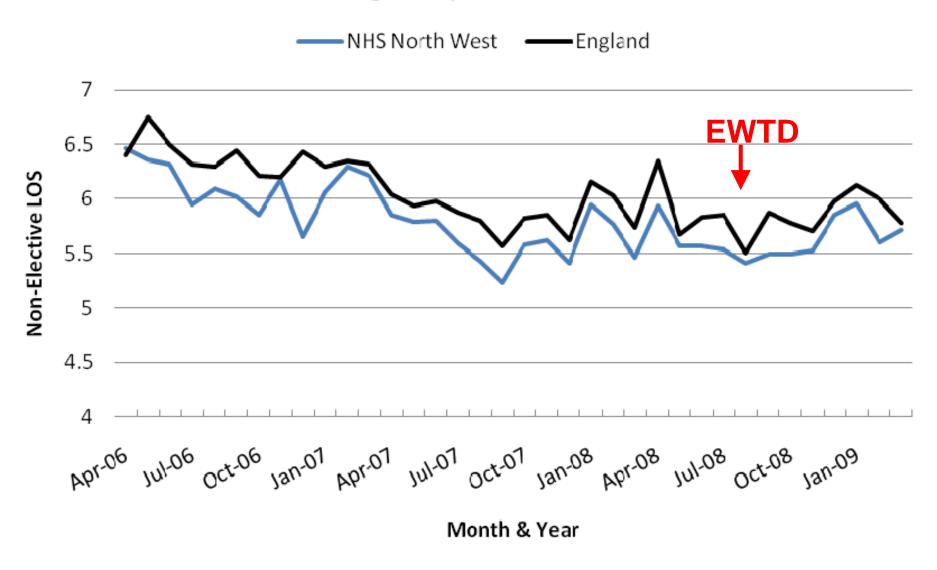


### HSMR: Summary points West

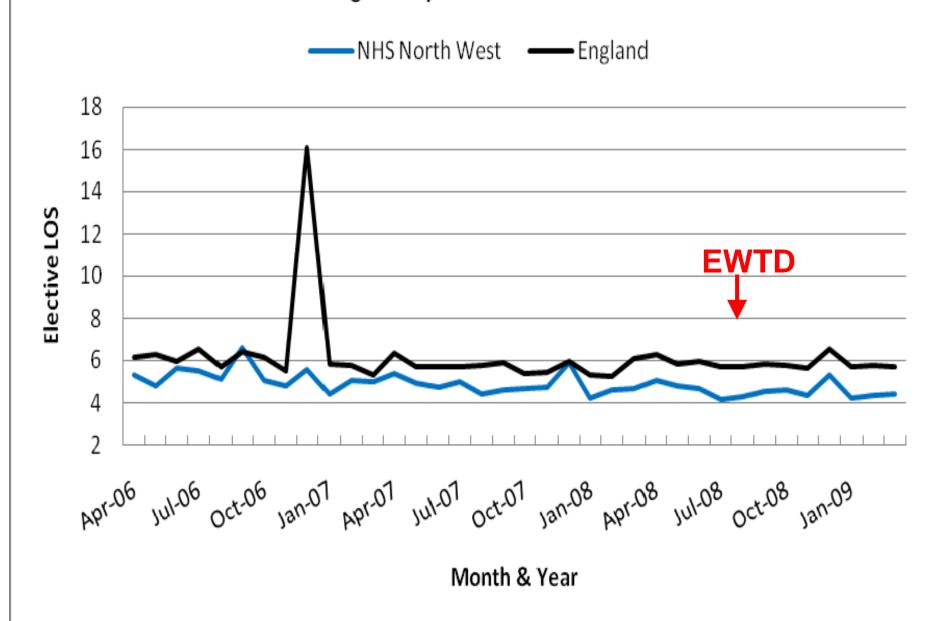
 No significant variation from the national HSMR trend following EWTD implementation in the North West...

- ...or during the <u>whole period</u> of EWTD implementation
- Where NHS North West showed a decline in the HSMR trend, this is reflected in the national picture

#### Non-Elective Average Length Of Stay Comparison Between NHS North West and England April 2006 to March 2009



#### Elective Average Length Of Stay Comparison Between NHS North West and England April 2006 to March 2009

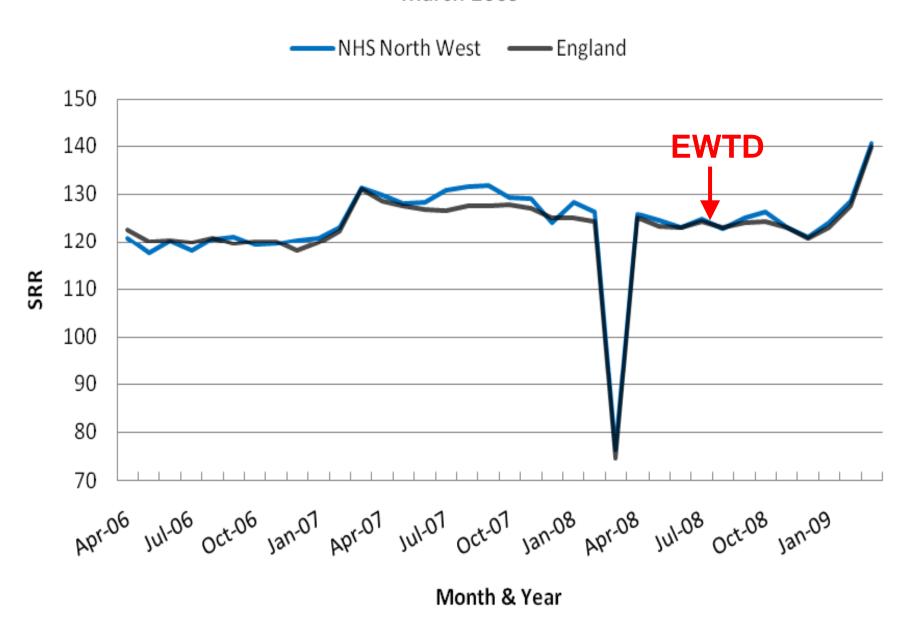




#### **ALOS: Summary points**

- Our data reveal a lower ALOS at NHS Northwest in comparison to England throughout the period studied
- Where there is an increase in national ALOS, this is mirrored at NHS North West
- From August 2008 the ALOS for NHS Northwest follows the national trend, although remains lower on average

#### Standardised Readmission Rate at NHS North West & England April 2006 - March 2009





#### SRR: Summary points

- The SRR at NHS Northwest from April 2006 to March 2009 is similar to the national average
- No appreciable trend change in SRR following introduction of a 48hr week in NHS Northwest, or any significant divergence from the national average



#### Credibility of HSMRs?

- ...have been utilized worldwide since the 90's to monitor provision of care over time and to identify opportunities for improvement
- ...have become an internationally recognised objective measure of quality of care
- ...adopted by Canadian Institute for Health Information as recently as 2005 in order to drive their patent safety agenda

# The pitfalls of HSMR West analysis

- administrative errors
- miscoding
- missing data

...however, missing data or miscoding would be unlikely to lead to the *clear* and *consistent* results that we have demonstrated



#### Was this comparison valid?

Was NHS North West truly 'compliant' with EWTD?

	EWTD compliance			
	Aug '08	Jan '09	Aug '09	
NHS NW				
ENGLAND				

### North West

### Was this comparison valid? Was NHS North West truly 'compliant' with EWTD?

	EWTD compliance			
	Aug '08	Jan '09	Aug '09	
NHS NW	94%*			
ENGLAND				

\*British Journal of Health Care Management 2009

#### NHS North West

### Was this comparison valid? Was NHS North West truly 'compliant' with EWTD?

	EWTD compliance		
	Aug '08	Jan '09	Aug '09
NHS NW	94%		
ENGLAND		<b>72%</b>	

#### NHS North West

### Was this comparison valid? Was NHS North West truly 'compliant' with EWTD?

	EWTD compliance		
	Aug '08	Jan '09	Aug '09
NHS NW	94%		
<b>ENGLAND</b>		72%	91%



#### Final points

- There is no evidence that EWTD implementation in the North West region of England has had any detrimental effect on parameters of patient safety
- •...In fact there has been **continued improvement** in these parameters since August 2008
- BUT...be aware of the challenge, and seize the opportunity





North West

#### Junior Doctor Advisory Team

**Thanks**