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| **AUDIT: National Respiratory Audit Programme and Organisational audit 2024 report****Summary –**  |
| **Signed off by: S**arah Duncan, Deputy Director, CVD-R |
| ***Background:*** This report presents the findings of a snapshot national audit of acute hospital respiratory services (both adults and children and young people) and pulmonary rehabilitation (PR) services across England and Wales which ran from 26 February to 29 March 2024.. It includes cohort data from 1 April 2022 to 31 March 2023 for admissions information,. Where static data snapshots were required, for example number of beds, this was taken from September 2023. Staffing information was a contemporaneous snapshot of the data from early 2024 . For children and young people’s asthma, data was compiled from 75% of participating hospitals, for adult asthma and COPD it was 69.4% of participating hospitals and for PR, it was 84.7% of participating hospitals.***NHS England clinical /policy leads summary:*** The report provides insight into how respiratory services for adults and children and young people are organised with the aim of identifying variations in both team structure and resourcing. The report’s five key recommendations focus on key areas which if improved will drive real impact and improve outcomes. The vast majority of recommendations are aimed at systems and a range additional online resources have been made available to support the report.***Comms summary:*** There is no associated press release, NRAP will publish final report and share with key stakeholders. We do anticipate any coverage, particularly as most of the recommendations are aimed at systems. Overall, we welcome the report and the role NRAP plays in helping systems and services improve outcomes, particularly in terms of the data it collects and the quality improvement support it provides.***Key positive findings:***The report’s five recommendations are focused on areas where variation is greatest. In each of the areas there are positive findings, for example * 74.3% of services reach the target of recommended staffing ratios for adult asthma,
* 93.4% of services have access to a respiratory nurse to review patients on a week-day
* 71% of hospitals in England report that there is tobacco dependence provision available for parents and carers who smoke

***Main areas for improvement:***1. NHS England and the NHS in Wales should endorse appropriate workforce-to-patient ratios in line with existing British Thoracic Society (BTS) workforce guidance. Where targets are not being met, Integrated care boards (ICBs) and local health boards (LHBs) should prioritise resources to enable individual providers to advertise at least 75% of relevant posts to achieve the ratio by the end of March 2026.
2. ICBs and LHBs to support services to achieve the following by the end of March 2026: 7-day respiratory consultant availability (adults) and 7-day respiratory nurse access for adults and CYP
* The recommendation for staffing rations, 7-day consultant and specialist nurse availability for adults already form part of the recommendations in the respiratory Getting It Right First Time (GIRFT) programme.
* Following NHS Long Term Workforce Plan, postgraduate specialty training places are being expanded and distributed of to account for areas where staff are needed the most in relation to population need and commensurate with available funding requirements
1. ICBs and LHBs should identify any hospitals which do not have a formal transition service and ensure they have one in place by the end of March 2026
* Systems are being supported through NHS E’s CYP asthma bundle, which covers the transition, and as part of a forthcoming phase of a broader framework covering the transition from CYP to adult services , short guides on management of transition and LTCs, including asthma, will be made available.
1. Systems should ensure all people with COPD and asthma should have access to tobacco dependence support, particularly children and young people admitted to hospital with asthma
* Good progress is being made against the tobacco LTP ambitions with over 90% of inpatient and 95% of maternity sites delivering tobacco dependence treatment services (Q1, 2024/25).
* The CYP bundle deliverables specifically refer to smoking cessation for CYP and parents and carers, including having the conversation and helping them to find support
1. Systems should support services so that they are able to accept pulmonary rehabilitation referrals from all suitable patients
* NHS England has funded the expansion of the PR audit so all suitable conditions can be captured and measured, alongside providing transformation funding and commissioning standards which also emphasise the importance of offering PR to all eligible patients, irrespective of their condition.
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