

Trust Headquarters
F Level, Queen Alexandra Hospital
Southwick Hill Road
Cosham
PORTSMOUTH, PO6 3LY
Tel: 023 9228 6000
Fax: 023 9228 6770

Ursula Ward MSc MA
Chief Executive

Chair, Health Overview & Scrutiny Panel
Customer, Community & Democratic Services
Portsmouth City Council
Civic Offices
Guildhall Square
Portsmouth
PO1 2AL

5 September 2011

Our ref:UW/AS

Dear Chair

Quarterly letter from Portsmouth Hospitals NHS Trust

I write to provide you with details for the Portsmouth Hospitals NHS Trust quarterly update for the Health Overview Scrutiny Panel, providing detail on our financial position year to date, the patient experience and other performance information.

Financial Update

In our June quarterly letter we informed the Panel of the financial challenges the Trust faces in 2011/12. The Trust, in common with all NHS Trusts and Foundation Trusts, has to manage a 1.5% reduction in the prices it can charge for treating patients, which is especially difficult at a time when inflation means that costs continue to rise. Therefore the Trust has a requirement to save a further £30.5m in the year ahead, £5.5m of which relates to the impact of Primary Care Trust demand management schemes. Our plans to deliver this are already well established and we continue to monitor this on a weekly basis.

At the end of June, which is month three of the 2011/12 financial year, the Trust reported a deficit on income and expenditure of £1.72m. This compares to a planned deficit of £1.94m, meaning the Trust is currently ahead of its planned profile by £220k. The Trust's financial plan has a deficit position in the early months of the financial year because of major reductions in income (due to tariff deflation, loss of non-recurrent income and demand management) having an immediate impact from 1st April 2011. The Trust's savings plan for 2011/12 of £30.5m cannot be delivered in equal instalments but will increase throughout the year and we anticipate a break even position by the end of March 2012.

Redundancy Programme

As previously reported the Trust announced that up to 99 posts will be lost through a redundancy programme to help the Trust establish financial stability.

A formal thirty day consultation period began on Friday 15 April 2011 for the reduction of up to a maximum of 99 posts. We had a good response to our request for voluntary redundancies and we are working through those to help reduce the need for compulsory redundancies.

Safeguarding patient care and the delivery of quality services remains our primary goal. The Trust has been working closely with staff side representatives and union officials throughout this process.

Hepatitis C treatment service

In August the Trust launched a new treatment service for Hepatitis C. Two new hepatitis nurse specialists are now at Queen Alexandra Hospital and are working with the hepatology consultants to deliver antiviral therapy. They will also be going out into the community to treat people closer to home. The service allows patients to be treated locally instead of travelling to Southampton to receive treatment. It is hoped the local service will mean more people in the area being able to get treatment for this life threatening, yet curable condition.

Bariatric Surgery

The Trust has started to provide bariatric surgery in the Southampton, Hampshire, Portsmouth and Isle of Wight area. Clinics take place every two weeks and the first operating list is due to start on 6 September. The bariatric ward is now equipped and so far the trust has seen more than 20 patients. The tender to provide bariatric surgery has the potential of £5m additional income to the Trust over the next three years. This is a developing area of work for the NHS which offers significant potential for the Trust to develop as a centre of expertise for weight loss surgery and work closely with health service partners on broader weight loss and related health issues.

Care Quality Commission (CQC) Report

In our June quarterly letter we reported that the CQC undertook an unannounced, albeit expected, inspection at the Trust in April, which was to check our compliance against Outcome 1 (Privacy & Dignity) and Outcome 5 (Nutrition) in relation to elderly patients. We are pleased that the CQC has reported that they found the Trust to be meeting these essential standards and we welcome the suggestions made to ensure we maintain our ongoing compliance.

We are reassured that patients were mainly positive about the care and treatment they were receiving. Privacy and dignity and the patient experience are the highest priorities for the Trust so we are pleased that the way that our staff speak to patients, involve them in their care and how they help them eat and drink were all recognised by the inspectors.

However, we are not complacent and we recognise that there are areas which can be addressed to further improve patient care and experience. Since the inspection, which took place in April, these areas have already been looked at and changes made that will further benefit patient care. For example ward staff have introduced rounds at set times to monitor activity such as fluid intake and documentation; we are piloting the use of hand wipes before and after mealtimes and the heads of nursing for each clinical service centre are undertaking audits of ward documentation.

We continue to monitor patient feedback and comments and will ensure continuous ongoing improvements in the delivery of our care across the Trust.

Helipad

The Trust submitted an application to Portsmouth City Council to vary the flight restrictions on the helipad at Queen Alexandra Hospital. Current planning permission for use of the helipad is between 8am and 6pm, or from dawn to dusk, whichever is the shorter. The Trust wants permission to allow urgent patients to arrive by helicopter between the hours of 6pm and 10pm, and for the allowance of night time arrivals when it is a life saving option.

The Trust's planning application was received by Portsmouth City Council on Tuesday 26 July and members of the public had until Friday 26 August 2011 to make a comment.

The request to vary the restrictions is based on clinical reasoning. While the majority of critically ill patients are brought to Queen Alexandra Hospital by ambulance, there are some occasions when patients need to be more urgently transported to the hospital for life saving medical attention. The helipad enables the rapid transportation of these critically ill patients who need urgent treatment within a short period of time. The majority of patients who come to the hospital via air ambulance are experiencing heart problems.

Prior to our application being submitted the Trust engaged with local residents and wrote directly to the Chair of the Heights Resident Association and the Paulsgrove Residents Association to explain the application and invite the chair and the association's members to a public meeting on 6 July. All residents of Sevenoaks Road and London Road (which are the roads adjacent to QA) were sent letters explaining the application and they were invited to the meeting on 6 July. This letter and the invitation to the public meeting was also sent to key stakeholders including LINK, Council of Governors, HOSP, HOSC, local MPS and the Patient Experience Council as well as the information being displayed on the Trust's website.

The city council is expected to make a decision in September.

St Mary's development

The Trust has been granted outline planning permission for its estate on the St Mary's Hospital site in Portsmouth. Permission has been given for 191 flats, a 60-bedroom care home and offices. This allows the Trust to sell the land to a developer. We value the land at £8m and the money will be used to pay for state-of-the-art medical equipment and technology already at Queen Alexandra Hospital. Portsmouth City Council's planning authority voted unanimously to approve the plans.

Maternity

To continue to meet the needs of pregnant women and their families in Portsmouth and surrounding areas the Trust has revaluated its Maternity services to make them more flexible. The service has launched a modernisation programme called 'Nurture'. Information about the programme has been communicated widely and has been well received.

There are 3 main priorities:

- One to one care for women in labour, encouraging the use of birth centres and home birth
- Efficient antenatal services in partnership with Health Visitors, G.P's and Childrens Centres
- Extra support for vulnerable families

There are six work streams linked to these priorities and these have now started to develop their ideas action plans.

The maternity service has been busy throughout the summer months and is set to remain busy into August and September. A short term contingency plan has been implemented to continue to ensure women access their choice of place of birth, women who have a clinical need for postnatal care will be accommodated at Queen Alexandra Hospital. The birthing centres in Portsmouth, Gosport and Petersfield remained open throughout for antenatal care, births and postnatal clinics and home postnatal support will continue as normal.

The adaption of the service proved successful allowing midwives to be more flexible to ensure women gave birth in their preferred location. The opportunity to give birth in a community setting has improved by 5-7%.

Breast Lymph Node Assay

The Trust is delighted to inform the panel that more than one thousand women in Portsmouth and surrounding areas have benefited from a revolutionary procedure called the Breast Lymph Node Assay. Portsmouth Hospitals NHS Trust was the first in the country to implement this rapid diagnostic test, which involves checking some lymph glands (sentinel lymph nodes) under the arm, to see if the cancer has already spread, at the same time as a patient has surgery to remove a breast tumour.

As part of the assay, surgeons receive test results during the operation allowing them to treat the patient there and then rather than the patient waiting two or three weeks for their results to come back. It reduces significantly the need for most repeat operations and enables them to start chemotherapy and other treatments earlier, which may lead to improved outcomes for women with breast cancer.

Infection Prevention and Control

The Trust is continuing in its fight against hospital acquired infections.

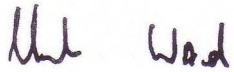
MRSA - The Trust achieved its target of no more than two post 48-hour MRSA bacteraemia for April-July, with just a single case occurring.

C.difficile – A challenging target has been set for C.difficile cases for 2011/12. Unfortunately the Trust breached its C.difficile trajectory for April-June by eight cases. A comprehensive action plan has been fully implemented and this has resulted in a significant reduction in the number of cases in July, with a halving of the trajectory deficit. This reduction has been sustained into August so far. The Trust anticipates returning to compliance by the end of September.

An external review, conducted at the request of the Trust's Infection Prevention and Control Team through the Health Protection Agency, concluded that the Trust remains a well performing organisation in relation to C.difficile and has a robust strategy to become a sustained low C.difficile

system. The Strategic Health Authority has also endorsed the comprehensive action plan to reduce C.difficile.

Yours sincerely

A handwritten signature in dark ink, appearing to read "Ursula Ward". The signature is written in a cursive style with some loops and flourishes.

Ursula Ward MSc MA
Chief Executive