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Dear Chair

Update letter from Portsmouth Hospitals NHS Trust

I write to provide the Health Overview Scrutiny Panel with an update from Portsmouth Hospitals NHS Trust. My colleague Peter Mellor, Director for Corporate Affairs, will further expand upon these issues at the formal HOSP meeting on 8 July.

You may be aware that the hospital trust has a new Chairman. Sir Ian Carruthers OBE was appointed by the NHS Trust Development Authority (NHS TDA), and he joined us this month. Sir Ian has great experience of health care within the NHS having previously been Chief Executive of NHS South of England and the South West Strategic Health Authority and was interim CEO of the NHS. He also held Chief Executive roles at the Hampshire and Isle of Wight Strategic Health Authority and Dorset and Somerset Strategic Health Authority.

Sir Ian replaces Alan Cole, who held the Interim Chairman role for a 12 month period, and now continues, in his role as Deputy Chairman.

We continue to push ahead with our innovative clinical developments and I am proud to announce that the Queen Alexandra Hospital has become the first Epicentre for robotic colorectal surgery in the UK. The designation was offered by Intuitive Surgical, maker of the da Vinci robotic surgical system. To have become an Epicentre the hospital must include a host surgeon who has completed at least 100 colorectal cases using the robot; teachable, reproducible and effective surgical techniques; and willingness to work towards being the most highly rated Epicentre in the nation.

The government has published new patient safety metrics for the first time this month on the NHS Choices website. We are pleased to have been recognised as among the best in this reporting, as the data shows that the trust is fully compliant with safe staffing levels. We are also further investing £800,000 into ward based staffing this year, to further strengthen our safe staffing levels.

The NHS Choices data details nurse, midwife and care staffing level data for inpatient wards in the acute, mental health and community sectors. It is the first time anywhere in the world that data on staffing, right down to ward level, has been publically available at a national level.

The Trust takes the care of its patients very seriously and already has a number of mechanisms in place to ensure its wards are safely staffed. For example, every day at 7:30am a review of ward based nurse staffing for the next 24 hours is undertaken; we hold a daily staffing meeting chaired by a senior nurse who reviews the information and takes action where necessary; we have a Duty Matron responsible for on-going reviews of any staffing issues 24 hours a day/7 days a week and we are able to book temporary staff at short notice should we need to in cases of sickness absence etc.

We also ensure that our ward daily staffing is clear to the public. Each ward displays a poster which shows the planned and actual numbers of staff (registered nurses and health care support workers) on shift each day, these posters can be clearly seen by our patients and visitors. On top of all of this the trust undertakes an in-depth nursing establishment review twice a year which is achieved by measuring the dependency of our patients and benchmarking ourselves against other similar hospital wards, in other hospitals.

We have been reporting on safer staffing levels since April 2014 in our public board reports, as we strongly support the need for openness and transparency on safe staffing for the community we serve.

Since my last update to the HOSP we have brought last year's financial accounts to a close. After much good work, enhancing our financial sustainability we ended the year with a small financial surplus. This is in contrast to many other acute hospital trusts in the country. Whilst this is the result of much hard work and improved efficiencies in our working practices we still have much to do to make further efficiency savings this year.

Unscheduled care continues to challenge us and we recognise at times it is not a great experience for our patients or our staff. Together with our partners in the health economy we now have a much greater transparency and visibility of where the real issues are, and we have started to put some interventions in place which should start to result in some improvements.

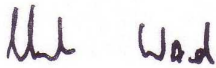
It is important to note that our emergency department attendances remain at an all-time high, indeed in May figures were 29% higher than in April with the numbers of medically fit patients ready for discharge also remaining high.

The trust has implemented a number of joint initiatives with health and social care partners to improve discharge of patients with complex needs, which includes the new QA@Home scheme which started in May.

Other actions include more integration relating to complex discharge management; daily teleconference calls where remedial actions are agreed and progressed alongside the daily Integrated Discharge Bureau meeting and additional internal actions to improve 'routine' discharges and operational flow. This includes daily silver and gold command escalation arrangements to support delivery of improved emergency department performance.

Finally, members of the HOSP have enjoyed many tours and visits to the hospital to see for themselves the improvements we are making and to gain a better understanding of the complexity and challenges faced in the hospital, one of the largest in the country. I further extend our hospitality for new Panel members to visit us, and through your officers hope we can soon organise a timetable of visits.

Kind regards

A handwritten signature in dark ink, appearing to read 'Ursula Ward', written in a cursive style.

Ursula Ward MSc MA
Chief Executive