

Health Overview and Scrutiny

Briefing paper

Title: Portsmouth Hospitals University NHS Trust update		
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<p>Purpose of the paper: To update the committee on the work being carried out by Portsmouth Hospitals University NHS Trust (PHU). It covers an update on our winter plan amidst winter pressures, recent industrial action and general updates.</p> <p>Additional context on winter pressures:</p> <ul style="list-style-type: none"> • Our Integrated Performance Report (IPR) is published on our public website and provides data on how the Trust is performing against our strategic aims. • NHS Providers' Winter Watch tracks key activity and demand figures across the NHS. They analyse the data, highlighting key trends to understand the pressure Trusts are under throughout the winter. <p>Supporting information: An attached slide deck gives an update to the data supplied in the last HOSP, with updated figures. They detail our Trust's performance over time with a focus on:</p> <ul style="list-style-type: none"> • Total General and Acute (G&A) beds which have increased over time • How the use of escalation and surge beds have increased • Total occupancy across the hospital which has increased consistently through the year 		
<p>Winter pressures</p> <p>The system winter plan has continued through January and February as we continue to see a high demand for urgent care services. We have worked hard to continue to address this demand and work with our partners on a system wide approach for the benefit of our patients and community.</p> <p>The demand for urgent and emergency care across the system has been higher than we anticipated. Much of the winter mitigation was predicated on increased SDEC activity through the use of additional designated SDEC space on Respiratory, Cardiology and SAU, and reduced nCTR numbers.</p> <p>SDEC areas have been bedded consistently since December, this has constrained the ability for patients to flow through.</p> <p>Our winter plan, previously presented, detailed our approach to this which we continue to deliver. Following a month-long critical incident, our focus remains to address the barriers that continue to cause us difficulty in improving and maintaining flow through the system.</p> <p>As a system, our focus in providing quality and effective healthcare is more crucial than ever, so we are coming together with health and social care partners in the Portsmouth and South East Hampshire area to take a series of immediate actions to improve flow within the wider system.</p>		

The QA Hospital site has faced significant demand with over 140 additional escalation care spaces frequently in use. This impacts the safe and effective operations of the hospital, putting a strain on clinical teams, compromising patient experience, and escalating safety risks.

This high level of occupancy inhibits the ability of teams to maintain patient flow and leads to delays in the Emergency Department for patients walking in and arriving by ambulance. It also impacts in the community with patients requiring an ambulance waiting longer than they should. One of the most significant ways we can help as a system is by reducing the number of patients residing in hospital with no criteria to reside (NCTR). Across the past two years the delay that these patients and families see in being discharged has increased significantly with more than 200 patients waiting today with on average of eight days delay after being declared medically fit.

In response to this, we initiated a Firebreak week, a collaborative effort aimed at improving urgent and emergency care for our population. It was a week-long endeavour from Monday 12 to Sunday 18 February that brought senior stakeholders from across the system together in one room to immediately address challenges as they arise. This was the first of what will be three firebreak weeks in the run up to the Easter weekend when we know there can be an increase in demand.

The primary objective of the week was to strategically reduce hospital occupancy and restore balance to our healthcare system. This will mean that should we see the further pressure in coming weeks that modelling suggests, we will all be in a better position to care for our patients. We also know that it is not good in terms of experience or outcome for patients to stay in hospital longer than necessary.

The firebreak weeks are supported by senior colleagues from Hampshire and Isle of Wight ICB, Portsmouth Hospitals University NHS Trust, South Central Ambulance Service (SCAS), Portsmouth City Council, Hampshire County Council, Solent NHS Trust, and Southern Health NHS Trust.

Together, we can make a significant impact on the health of our community and ensure that our healthcare services operate efficiently and effectively. We will not be publicly communicating the work due to take place this week but will be sharing information through our public channels around how communities can support with patient discharge, choosing the right service and self-care.

Firebreak FAQs

What is a firebreak?

A firebreak is a large-scale plan that pulls together senior colleagues from not just acute hospitals, but also community, ambulance, social care, primary care, and the Integrated Care System (ICS) to reduce occupancy levels by taking immediate actions.

These actions will include reviewing inpatients with No Criteria to Reside (NCTR) and reducing this number through safe, but more efficient, daily discharges into their next place of care. Achieving this will positively impact patient waiting times and reduce ambulance handover times and waits in the community.

Why do we need to hold a firebreak?

By bringing in partners from the start, we can create the energy and focus needed to make real sustainable improvements that benefit not just the hospital, but the wider system too.

The main aim of the week is to reduce hospital occupancy, allowing Same Day Emergency Care (SDEC) areas and services to utilize their capacity effectively. By doing so, we hope to restore balance to the healthcare system and create a more sustainable approach for the coming months when modelling shows we may see an increase in demand. We also know that it is not good in terms of experience or outcome for our patients to stay in hospital longer than necessary.

When is the firebreak taking place?

Our first firebreak took place from Monday 12 February to Sunday 18 February as a collaborative effort aimed at improving urgent and emergency care for our population. This will be a week-long endeavour, resembling an incident response but with a unified system approach, bringing together all stakeholders in one room to address challenges as they arise.

What afterwards?

After the week has concluded, we will share any learning and ongoing actions. A big part of the firebreak week is about making sure we keep up the pace and continue working together to drive improvements.

Further firebreak weeks are scheduled to take place on:

- 4 to 10 March
- 21 to 28 March (ahead of the Easter weekend)

Our performance data:

Ahead of January's HOSP meeting, we were asked to prepare data looking at:

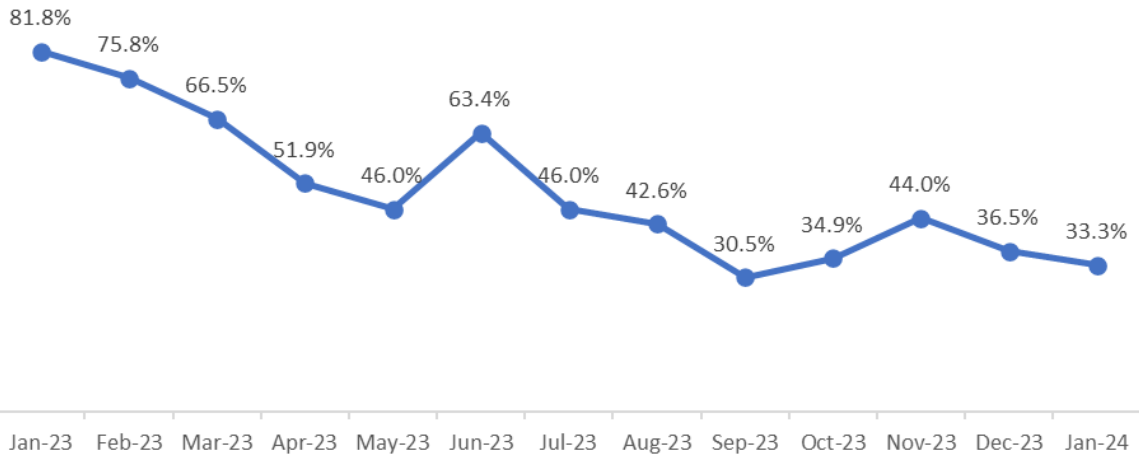
- Ambulance handover times
- 4-hour target performance
- Occupancy levels

It was noted in January's meeting the committee found it helpful to have this data, so we have provided the same three areas of focus with updated figures for the March report.

1. Ambulance handover times for the last 12 months

Nationally we are measured against the percentage of handovers completed within 15 minutes, this graph shows our performance over the last 12 months.

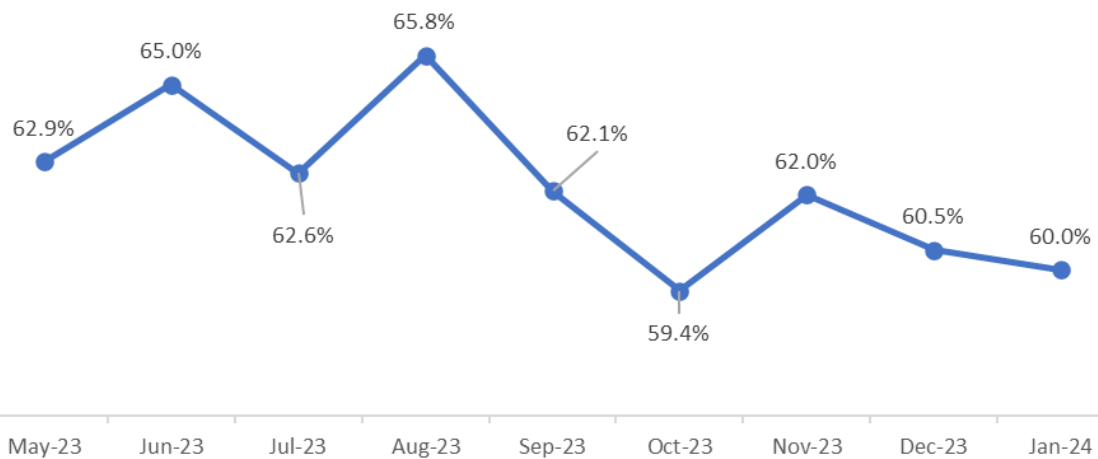
Percentage of patients arriving by ambulance handed over within 15 minutes



3. 4 hour waiting targets

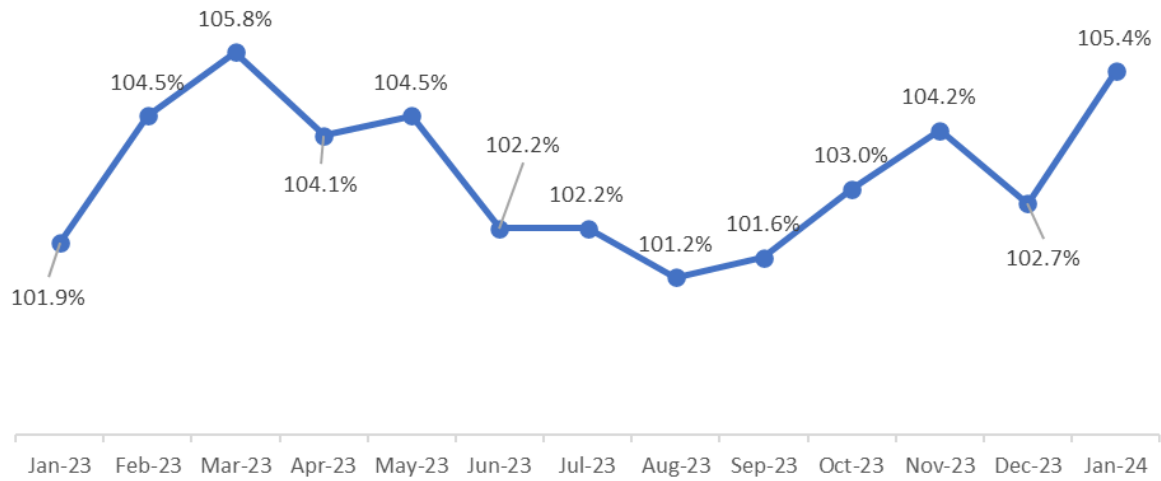
The Trust was part of the Urgent and emergency care clinical review of standards until mid-May this 2023. This graph shows our performance since May 2023:

Trust 4 Hour Performance



1. Occupancy levels for the last 12 months:

DIST - Trust Bed Occupancy (G&A Core Bed Stock)



Summary of data:

Period	Percentage of patients arriving by ambulance handed over within 15 minutes	Trust 4 Hour Performance	DIST - Trust Bed Occupancy (G&A Core Bed Stock)
Feb-23	75.8%		104.5%
Mar-23	66.5%		105.8%
Apr-23	51.9%		104.1%
May-23	46.0%	62.9%	104.5%
Jun-23	63.4%	65.0%	102.2%
Jul-23	46.0%	62.6%	102.2%
Aug-23	42.6%	65.8%	101.2%
Sep-23	30.5%	62.1%	101.6%
Oct-23	34.9%	59.4%	103.0%
Nov-23	44.0%	62.0%	104.2%
Dec-23	36.5%	60.5%	102.7%
Jan-24	33.3%	60.0%	105.4%

Industrial Action: Junior Doctor Strikes

Planned industrial action took place in February in the form of Junior Doctor strikes. PHU experienced 34% of junior doctors taking strike action.

General updates:

Building Better Emergency Care progress – We were recently joined

Wait List Validation:

The Trust is using Waiting List Validation to check in with patients on our waiting lists. As waiting lists for appointments and procedures across the NHS continue to grow, the Trust is taking action to help reduce waiting times by enabling a process that allows patients to confirm whether they still require their appointment, ensuring those that have been referred to us for an appointment or procedure still wish to remain on our waiting list. Our second cohort of this was sent out in January and has been a great success, helping to reduce the number of patients on the waiting list and improve wait times for those remaining.

CQC Maternity report:

We are proud that our maternity services were rated 'Good' following an inspection by the Care Quality Commission.

The inspection, which took place in October, looked at how safe and well-led services provided at Queen Alexandra Hospital, St Mary's Hospital and Gosport War Memorial Hospital.

The CQC highlighted several areas of good practice including:

- Women and people using the service spoke positively to inspectors about the professionalism and quality of care they received.
- Staff told inspectors they felt respected and praised the safety culture and collaborative working in the service. Leaders should be proud to have developed a culture that is committed to improving care.
- Staff were well-trained, understood how to protect woman and birthing people from abuse, and managed safety well.
- The service had several ongoing improvement projects including work to engage with less-heard groups such as people from local Filipino, Ghanaian, and Nigerian communities.
- Staff spoke positively about working at the trust and leaders took a strong focus on staff wellbeing, ensuring they took time for breaks during their shifts.

Other good news for our Maternity Services came through positive results in the CQC's National Maternity Survey 2023, which looks at patient experience, maintaining scores from the previous year and rating higher than most trusts for eight questions, including scoring 9.7 (out of 10) for provision of mental health support during pregnancy.

Endoscopy Unit at Queen Alexandra Hospital

The Endoscopy Unit at QA Hospital provides a wide range of diagnostic and therapeutic procedures to more than 15,000 patients a year. Due to growing demand for day-patient procedures, planning permission to develop a new unit on the ground floor of Lancaster House, near the north car park at QA Hospital, was submitted. Planning permission was granted in February 2024 and work is due to begin shortly to develop the space that was previously occupied

by corporate teams. The development will increase the number of rooms that the procedure can be offered in, as well as providing two recovery areas and improved access to the building. The unit is due to open in late 2024.

Community Diagnostic Centre (CDC) at Rodney Road

The Community Diagnostic Centre (CDC) in Portsmouth first opened in 2021 at St Mary's Community Health Campus in Milton, with spoke sites at Fareham Community Hospital and Oak Park Community Clinic, Havant. The programme to increase diagnostic capacity testing, including mammograms, blood tests, ultrasounds and heart monitoring, and reduce waiting times for diagnosis and treatment, was part of a national investment programme from NHS England.

As part of the next stage of the CDC in Portsmouth, the Rodney Road Centre, in Illustrious Drive, Milton, will be developed to provide more diagnostic testing within a specially designed modern healthcare environment, as part of a partnership with Alliance Medical. The Rodney Road Centre currently houses several clinical and non-clinical teams who will be relocated either permanently or temporarily.

A planning application has been submitted to Portsmouth City Council and information has been shared with local residents about the plans. It is hoped the centre will be open to patients in early 2025.

Two new theatres at Queen Alexandra Hospital

Our two new theatres on the QA Hospital site are due to be complete in Spring 2024. They will help improve patient experience by reducing the risk of last-minute cancellations due to the emergency repairs in older theatres and allow us to deliver a higher number of procedures. The new theatres also mean that when we are carrying out work in other theatres, there won't be a reduction in activity.

New Emergency Department at Queen Alexandra Hospital

Work continues both with the build and the development of improved clinical models to support our new Emergency Department. In December 2023, our contractors held a Topping Out Ceremony and in the past few months we have hosted visits for local MPs and other stakeholders to see how the build is progressing. We remain on track to open later this year ahead of Winter.

Entrance developments at Queen Alexandra Hospital

Work to redevelop the main entrance at QA Hospital began in 2023 and includes the addition of further food and retail options for patients, visitors, and staff (Marks and Spencer Food and The Stock Shop), as well as a new upper floor lecture theatre to support the provision of high-quality training facilities. The development will also include the provision of an accredited Changing Place facility. Work on the public sections of main entrance is due to be complete in May 2024 with the second floor being complete soon after. Work will begin on the north entrance in May 2024 and aims to be complete by the end of the year.