

Chairman's bulletin

February 2015

Dear member

Our board of directors meet around six times a year to discuss performance, new developments and make decisions on how the trust is run. I wanted to be able to share with you an update from our latest board of directors' meeting.

I hope you find this bulletin informative. I will be writing to you after every board meeting. If you have any comments about the format or content please contact the private office.

Pressure on the health system

In the past few weeks the demand for emergency services has never been as high. What we're experiencing is reflected in the national picture. The system is under pressure and, like everywhere else in the country, we are feeling it here.

As you know we plan for winter pressures every year but no one could have predicted the surge in demand we have seen. Our plans are to have 16 additional beds open and this is what the commissioner have paid us for. However during our busiest times we have had over 60 additional beds open. Medical patients are being looked after on surgical wards and surgical patients are staying overnight in the day case unit rather than on the ward.

While the cold weather is with us the pressure is not likely to go away. At their meeting last week the board of directors paid tribute to the way staff are responding to the pressure we are under and the way they are supporting each other during this very busy time.

You may have watched Panorama and seen us featured in a follow up programme after the one which was broadcast last year. It shows very clearly the pressure the NHS is under and how essential it is to keep patients flowing through the system because if we can't discharge patients this has an impact on our ability to admit patients through A and E. I hope you would agree that our staff gave a very good account of themselves and showed how they work as a team to treat people safely and compassionately while in their care.

We're busy, but we're performing

While we're seeing record numbers of patients we're still performing. The media have got into the habit of reporting the accident and emergency four hour target every week. We achieved the four hour target in October but despite every effort, we missed it in November and December. However taking the quarter as a whole our good performance in October meant we met the four hour target for the December quarter. We're still about third best trust in the country for our performance and we should remember this, despite all the noise we're hearing.

We're also much better placed having one centralised accident and emergency department because we can have seven day a week consultant cover from 8am to after 10pm each day with senior doctor cover supported by a consultant on call overnight. We simply could not do that on two sites which meant people's chances of survival and good outcome could be different, depending on the time of day. That used to be acceptable five or 10 years ago but, quite rightly, it isn't now. Accidents and injuries don't just happen in working hours. People should expect the same standard of care at all times of the day and night and this is what we can now achieve.

We're also performing well on the cancer targets, which means that people affected by cancer are getting seen, diagnosed and treated in an effective and timely way. We're also exceeding the targets for people being referred in, diagnosed and treated within 18 weeks. It's nothing short of revolution that people have their operations or procedures in a matter of weeks now when it was usual for people to wait months or even years for treatment. This is down to the hard work of our staff and it's what we would want for our own loved ones.

We're also performing on CDiff and MRSA. One MRSA in over two years (which appears to have been caused by a contaminated sample) is an excellent performance and, at the end of December 15 CDiff cases out of tolerance of 30 is fantastic. These are achievements which no one would have thought possible a few years ago and they are testament to the sheer hard work and determination of staff to tackle them.

Thanks to our staff's hard work:

- pressure sores are decreasing
- falls are decreasing
- blood clots (venous thromboembolisms or VTEs) are falling
- urinary tract infections are falling
- family and friend rates are rising
- o 95% of people attending A&E would recommend it
- o 97% of people using our maternity services would recommend them
- formal complaints have fallen year on year and we are meeting our complaints response times 100% of the time

A word about mortality

You might have read in the press that we are being reported as having higher than expected deaths. The figures are complex but they measure how many people died in our hospitals or within 30 days of leaving hospital as a proportion of the number of people admitted to our hospitals.

Faced with a result like this we don't just sit back and accept it. We're looking at every aspect of care to see if it can be improved. We particularly looking at pneumonia because we see a lot of patients with pneumonia and we want to make sure we're doing the very best we can for them.

The mortality rates are the risk adjusted deaths as a proportion of the total number of admitted patients. We have a challenge because we actually see a lot of patients in our ambulatory care unit (around 20% of all the emergency patients we see) but, because they're not admitted to hospital we do not count them in our total admissions. This makes our mortality figures look higher than they really are.

The thing we've asked ourselves is 'are more people actually dying than we might expect?' A massive amount of work is being done to look into this and the answer is *no they're not*.

We're investing

In the middle of all this activity we need to keep replacing medical equipment and keeping the estate up to scratch. The last part of bringing acute services together is the cardiac catheter lab which moved into its new home in the old physiotherapy department at the University Hospital of North Tees last week. It's a huge task for our estates team to make room for everyone and it involved relocating people without interrupting patient care.

Services and departments have been brought together in the main block at the University Hospital of Hartlepool. There is no bowling alley or steam room there, despite what you might have heard! Bringing the departments together means we can close down some parts of the site to save on energy costs and rates.

The old MRI scanner at UHNT has been removed and work is underway to get things ready for the arrival of the new scanner in March. This technology means we can provide leading edge diagnostics for our patients.

There is £12m in the budget for all these investments. It's vital we keep the environment and equipment as up to date as possible to give our staff the best facilities to work in and take care of patients.

Now the not so good news

From being a trust that could balance its books we're now finding this a challenge. We went behind plan quite early in 2014/15 and we've not been able to recover. It's not helped by the fact we're opening more beds and putting more things into place to deal with the demand we're seeing, but as things stand we're not being paid for it. However the right thing to do is treat the patients first and sort out the money later which is what we intend to do.

Being in deficit of £2.4m means we're still in a better place than a lot of trusts around us. To keep it in perspective it's worth remembering that £2.4m is about 1% of our total expenditure.

Just like at home when what comes in doesn't cover what goes out we have to find savings. Next year isn't going to be easy. For example we know next year our insurance for medical incidents is going up by well over £2m. We'll have to find money somewhere else to pay for that. While we find these efficiencies we also need to keep on improving quality and safety. It's a big ask. We've always stepped up to the task before and I'm sure we will again. We all want to work for a successful trust so we need to work together to make these things happen.

Our sickness rates have also risen to an average of over 5%. In just one month sickness cost the trust £500,000. It also meant more reliance on agency staff and put additional strain on those who were at work.

The board papers

The board papers from the last board meeting are posted on our website when the minutes of the previous meeting are approved. If you would like to read the board papers please go to www.nth.nhs.uk/about/board-meetings. Board meetings are held in public and you are welcome to attend. To find out more visit our website at www.nth.nhs.uk or to confirm your attendance please contact the private office on 01642 624060.