Briefing on Oxford University Hospitals

1 June – Issue 30

This briefing is a regular update for our partner organisations and key stakeholders within the wider community that we serve. It contains the latest news from the Oxford University Hospitals NHS Trust (OUH).

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1 New chief executive for OUH appointed

We are delighted to confirm the appointment of our new Chief Executive, Dr Bruno Holthof. Dr Holthof is relocating from Belgium to Oxford, with his family, and will take up his new role on 1 October 2015. For the past ten years Dr Holthof has been Chief Executive of ZNA, a network of general and specialised hospitals in and around Antwerp. Under his leadership, ZNA has come to be recognised as one of the best performing healthcare systems in Europe. For more about Dr Holthof see: Oxford University Hospitals NHS Trust appoints new Chief Executive

2 Foundation Trust progress

OUH is now in the final stage of assessment by Monitor (the regulating body for Foundation Trusts). We submitted an updated Long Term Financial Model and Integrated Business Plan to Monitor on 23 April. Monitor will also be informed by the reports that were taken to the May Trust Board meeting on our progress, in terms of our performance and quality governance and our plans to meet national access standards.

The Council of Governors is now operating in shadow form, and met for two induction days in March and April, with further meetings and seminars being scheduled over the next few months. For more information on this please see the paper to the May Trust Board: Update on Foundation Trust application

3 Performance and end of year figures

Despite the continued high levels of activity and delays in the system, staff have been working extremely hard to ensure that the quality of patients’ clinical care remains high and that services were maintained with minimum disruption. The figures below relate to the Trust’s performance in March or at year end as reported to the Trust Board in March 2015. You can read the full report here: Integrated Performance Report Month 12

Operational performance

Delayed transfers of care

This area remains of significant concern to the Trust. In March, delayed transfers of care (as a percentage of occupied beds) was 10.88%. We aim to achieve 3.5%. We continue to work hard with partners in social services and Oxford Health to improve discharge rates.

Access targets

Four Hour Standard

In common with many other acute Trusts across the country, OUH did not achieve the four hour standard of over 95% of patients seen, treated, admitted or discharged within four hours in March, when our figures were 86.7% of patients seen within the national standard. We are working hard with our partners to improve the flow of patients through the system. We want to be able to admit patients quicker into our hospitals by improving the speed of discharging patients into appropriate care elsewhere. The Trust has also made a number of improvements to help
improve waiting times, including opening 86 more permanent beds, enhanced seven day working across various clinical services and increased senior clinical decision makers throughout the week. We continue to work hard on improving flow in order to achieve this important standard. To read more about what we are doing, see item 4 on Breaking the Cycle.

Cancer waits
Seven of the eight national cancer waiting time standards were achieved in January and February. However, the standard for cancer patients to start treatment within 62 days of referral was not achieved. The Trust does not want any patient to be waiting longer than necessary, and has an action plan which includes quicker diagnosis to offer earlier treatment. It also looks at the timelines of referrals from other hospitals (part of the problem in meeting this standard is some late referrals from other hospitals) and also encouraging better communication to ensure patients are aware of the reason for an urgent referral, and therefore the requirement to take up appointments offered.

Stroke patients
Unfortunately in March only 76.81% of our stroke patients spent more than 90% of their time on the Stroke Unit. This figure means we did not meet the national standard of 80% of patients spending more than 90% of their time on the Stroke Unit.

Diagnostic tests
Patients waiting for a diagnostic test should wait no more than six weeks from referral. January data revealed that we were again well within our target of no more than 1% of patients waiting longer than six weeks.

18 week wait standards
We have met the nationally set standards for non-admitted patients (outpatients) and for patients on an incomplete pathway (those who have yet to start treatment) to begin treatment within 18 weeks of referral. March’s figures for non-admitted patients were 95.13% (against a national standard of 95%) and for those who are yet to start treatment we achieved 92.61% (against a national standard of 92%).

Infection control
There have been three avoidable cases of MRSA throughout the Trust this year meaning that we have failed our target (of no avoidable cases for the year). We have had 61 cases of Clostridium difficile against an upper limit of 67 avoidable cases. You can find more detail on our quality measures in the report to the Trust Board here: Quality Report

Finance
The Trust is grateful to all our staff who enabled us to meet our financial plans in 2014/15. However, some shortfalls on the Cost Improvement Programme and in income meant that the Trust had to rely on some one-off measures and reserves in order to achieve its plan. The Trust
will therefore have to maintain expenditure within budgets this year to deliver on our financial responsibilities.

Contracts have been agreed for 2015/16 with our commissioners. These set out the range and level of services that we are required to provide, the quality standards we must deliver and the income we will receive for providing these services. It is likely that the financial position in general will be very challenging. The impact of real terms decreases in income and increased costs will together introduce further financial pressure for OUH. The Trust will be working hard to deliver a break-even position in 2015/16. More information can be found in the latest Board report: Financial Performance 2014-15

4 ‘Breaking the Cycle’ project
The Trust took part in a nationally developed initiative with health and social care partners in Oxfordshire called ‘Breaking the cycle’ (known at OUH as The Perfect Week), which ran for seven days from 23 April.

The objective was to identify new ways of working and areas for improvement in the patient journey through emergency care and back home again, by working together with partners responsible for care of patients returning into the community. We were particularly focused on finding solutions to difficulties managing demand and capacity across all our hospital sites. This is particularly important if we are to avoid long patient stays in emergency departments. As an example of improvement during that week, we admitted or discharged 96% of patients attending our emergency departments within four hours.

A Perfect Theatre Week is now planned in June. You can read more about The Perfect Week on our website: Breaking the Cycle to Establish the Perfect Week

5 International Nurses Day
On 12 May, International Nurses Day, our Chief Nurse Catherine Stoddart organised an inaugural Nursing and Midwifery Conference for nurses and midwives. At the conference, the Trust’s new Nursing and Midwifery Strategy 2015-2018 was launched. This strategy sets out the Trust’s vision to be internationally recognised for leading the way in outstanding nursing and midwifery. This will now be an annual event. The Strategy can be found here on the March Trust Board agenda: Nursing and Midwifery Strategy

6 Land at Littlemore
The Trust is very pleased that its planning application to build housing on land at Armstrong Road in Littlemore was approved by Oxford City Council. This will deliver much needed new housing, and help Oxford University Hospitals NHS Trust to accelerate key healthcare development for the benefit of Oxfordshire residents.

7 Car parking at the John Radcliffe Hospital
There has been considerable interest and comment recently on the problems with car parking on our Oxford sites, particularly at the John Radcliffe Hospital. While there are no immediate plans to
increase the number of parking spaces, the Trust is currently in discussion with both Oxford City Council and Oxfordshire County Council to review whether more patient spaces could be made available. The provision of parking on site is a complex one.

Currently at the John Radcliffe Hospital we offer 730 visitor spaces and 1606 staff designated parking spaces. There are no plans to reduce the number of staff parking spaces, but we continue to explore alternative off-site parking options for staff.

In order to minimise both traffic flow onto the site and demand on the capacity of staff parking, our staff are always encouraged to use alternative methods of transport, with many cycling and taking buses. The Trust also supports green commuting initiatives and offers a Cycle to Work Scheme providing amenities for cyclists, including secure cycle racks. Additionally, staff parking on site is restricted and all staff must meet certain eligibility criteria to obtain a permit.

8 Relocation and improvements to services
In April, the Urology Outpatients Department moved to what was previously the private outpatients’ area on the Churchill site. This area is now called Wytham Urology Outpatients. Reception phone numbers remain the same.

On 1 June, The Oxford Eye Hospital introduced a new call handling system to help them with the very high volume of calls that they receive. There is now a new number for contacting the whole of the Eye Hospital, and a new email address for appointment enquiries.
Phone: 01865 234567. Email: oeh.eyeappointments@nhs.net

At its May meeting the Trust Board approved plans to move the respiratory inpatient and cystic fibrosis services from the Churchill Hospital to a 21-bed Respiratory Ward at the John Radcliffe Hospital on Level 7. It also agreed to establish a six bed unit on SC/D dedicated to Cystic Fibrosis and Bronchiectasis Outpatient and Treatment. Work has now started on making the necessary estates changes: Business case for relocation of respiratory inpatient and cystic fibrosis services

9 Working with other local health partners
A workshop called ‘Developing New Models of Care’ hosted by our commissioners, Oxfordshire Clinical Commissioning Group (OCCG), took place in April to share and discuss system-wide transformation across Oxfordshire. Over 70 participants attended from OUH, Oxford Health NHS Foundation Trust, South Central Ambulance Service, Healthwatch (the consumer champion for health and social care) and General Practice, as well as patient representatives. The workshop explored how to deliver better integrated care to meet the needs of the people of Oxfordshire.

Details of local transformation initiatives were presented, including General Practice Federations, Mental Health Partnership, Integrated Locality Teams and developments in Systems Leadership. In addition, OUH and Oxford Health informed people about the developments of the Oxfordshire Alliance for Integrated Care. OCCG plans to disseminate information from the workshop to support the development of joint and new ways of working across Oxfordshire.
10 Clinical trials at OUH
A recent report highlighted excellent news about clinical trials here at OUH. Figures from the National Institute for Health Research (NIHR) show an improvement in the proportion of trials at the Trust which recruit the first patient within 70 days of permissions being in place. In 2014 this was 95%, a significant increase on 34.7% in 2013. This means OUH is ranked second of England’s most research-active NHS trusts for a key metric of how quickly clinical trials can be started. This will quicken the pace of translational research in the Trust and give assurance to outside investors in our research. This improvement has been led by Professor Keith Channon, Trust Director of Research and Development, and research staff are to be congratulated for this excellent performance.

For more on this story please visit our website: [Time taken to begin research among England’s best](#)

11 Recapturing memories of patients with dementia

Oxford University Hospitals NHS Trust marked the start of Dementia Awareness Week on 17 May 2015 with the introduction of memory boxes and eight ‘reminiscence machines’, designed to help enhance the treatment and experience of dementia patients.

The boxes contain bright, primary coloured objects, including a blanket, iPod, clock and tactile objects, to offer comfort and stimulation to patients.

The machines are made up of a trolley on wheels which holds a flat screen monitor with touchscreen capability, wireless keyboard and mouse, and are pre-loaded with music and photographs from the 1940s/50s/60s as well as games.

For more about this initiative see [Recapturing memories for patients with dementia](#)
12 Trial of radioactive glass particles to tackle cancer

Cancer treatment with radioactive glass microspheres is to be trialled for the first time in the UK at the Churchill Hospital. The Trust is seeking volunteer patients as part of the global EPOCH clinical trial of selective internal radiotherapy for bowel cancer that has spread to the liver and has become resistant to chemotherapy.

For more information see: Trial of radioactive glass particles to tackle cancer

13 Launch of fundraising appeal for satellite radiotherapy unit in Swindon

On 28 May, OUH and Great Western Hospitals (GWH) launched a new £2.9 million fundraising appeal to take radiotherapy treatment for patients in Swindon and Wiltshire closer to home, by building a new unit at GWH in Swindon. The appeal by Brighter Futures, Great Western Hospitals NHS Foundation Trust’s charity, will fund two linear accelerators, which will deliver treatment provided by OUH in a new radiotherapy centre.

Currently around 3,000 people from the Swindon and Wiltshire area are diagnosed with some form of cancer each year at GWH. In 2013/14 around 700 patients made the 70 mile round-trip to OUH’s Churchill Hospital in Oxford for radiotherapy. Treatment usually lasts for four to seven weeks, made up of daily visits.

While the expansion of the OUH service is subject to a final approval process, the planning stages are well advanced and it is envisaged that treatment could be available locally by the end of 2017.
14 Dates for your diary

Oxford Biomedical Research Centre Public Talks

Autoimmunity - when our bodies turn on us

Thursday 11 June 2015 - Refreshments from 6.00pm for a 6.30pm start

Lecture Theatre, 1st floor, Nuffield Orthopaedic Centre

Professor Bowness, Professor of Experimental Rheumatology, University of Oxford's Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences

For more information please visit www.oxfordbrc.nihr.ac.uk

Concerts

Radcliffe Orchestra Concert in aid of Vale House

Tingewick Hall, John Radcliffe Hospital

Saturday 6 June 2015 7.45pm

Conductor: Catherine Underwood

Programme:
- Dukas - La Péri Overture
- Tchaikovsky - Violin Concerto (Soloist: Olivier Bonnici)
- Holst - The Planets

www.radcliffeorchestra.org.uk

Opportunity to give your views

Join us for a quality conversation

Thursday 4 June 2015 at 4.00pm - 6.00pm

Tingewick Hall Foyer at the John Radcliffe Hospital

Members of the public are invited to attend a meeting at which the Trust's Quality Priorities for the coming year will be announced and discussed and progress from the last year will be presented. The meeting will also provide anyone with an interest in our hospitals with the opportunity to listen and comment.

For further information, directions to the venue, or to discuss any support available (such as hearing loops) please contact: olivia.hay@ouh.nhs.uk

Light refreshments will be provided.

Open days

Thyroid Eye Disease Patient Group Evening

Lecture Theatre, 1st floor, Nuffield Orthopaedic Centre

Wednesday 3 June 2015 6.00pm - 7.30pm

The inaugural Thyroid Eye Disease (TED) Patient Group Evening is open to patients and their friends and family. There will be talks provided by thyroid specialists, including:

- Jonathan Norris (Ophthalmology)
- Joel David (Rheumatology)
- Helen Turner (Endocrinology)
- Louise Dalton (Psychology)
The evening will be interactive and aimed at giving you more information regarding TED. Please confirm attendance with Jill Hudson: **01865 231578** Email: **jill.hudson@ouh.nhs.uk** For more details please see [Events](#) on the OUH website.

**Dementia Information Café at the John Radcliffe Hospital**  
*Once a month on the last Tuesday 2.00pm - 3.30pm*

**On three (restaurant), Level 3, John Radcliffe Hospital**  
Are you visiting a friend or relative with dementia in hospital, or caring for someone with the condition? Why not join us for tea, biscuits and an informal chat about the support available? Help and advice will be on hand from the Alzheimer's Society, Carers Oxfordshire, Oxfordshire Age UK and Guideposts Oxfordshire. For more information about the Dementia Information Café please contact **gaynor.parsons@ouh.nhs.uk**

**Charitable events**  
**Abseil for your hospital charity**  
**Sunday 14 June or Sunday 20 September 2015**  
For more information please call 01865 743444, email **charity@ouh.nhs.uk** or go to [www.ouh.nhs.uk/charity](http://www.ouh.nhs.uk/charity)

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