July 2015

This briefing is for GPs, practice staff and others in primary care, on changes and developments at the Oxford University Hospitals NHS Trust (OUH). It has been prepared by the OUH and will be circulated on a regular basis. You can also read it on www.ouh.nhs.uk/services/gp-bulletin.

If you have any comments or suggestions, please contact susan.brown@ouh.nhs.uk

Any feedback on web issues please email to web.editor@ouh.nhs.uk

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1. Key performance measures

Performance
Please see the latest summary of our performance against key standards and indicators here.

Healthcare associated infections
- MRSA and Cdifficile: latest figures

Focus on quality
The Trust has published its annual Quality Account outlining its key achievements for the year, where improvements need to be made and priorities for the coming year. We had a successful meeting with patients, members of the public and interested parties to discuss our priorities in June and this will be followed up with a further meeting in October, date to be confirmed.

The Trust’s Quality Priorities for 2015/16

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## EFFECTIVENESS

5. Management of patients presenting with sepsis

## PATIENT EXPERIENCE

6. End of life: improving people’s care in the last few days and hours of life

7. Improving communication, feedback, engagement and complaints management: *with patients, carers, healthcare staff and social care providers*

The full account can be found here: [Quality Account 2014-2015](#)

### Finance

The Trust has reported that it was £0.5m behind its planned financial position to break even after the first two months at the end of May. The financial challenges for the Trust for 2015/16 are to:

- deliver the contracted levels of activity
- reduce the cost of premium staff (reduce reliance on agency staff through improving recruitment and retention)
- deliver the savings and transformation programme.

For more on the Trust’s latest finances see: [Trust Board paper – Financial performance up to 31 May](#)

### 2. Clinical articles and referral protocols

#### Horton endoscopy

The Trust Board in July agreed to a £2.6 million investment to bring the unit at the Horton up to the latest standards. This investment will secure the future of endoscopy services at the Horton. The improvements allow for the better provision of same-sex accommodation and improved decontamination.

During the build period, we had hoped to provide replacement facilities on site at the Horton. Unfortunately, this has not proven to be financially or practically possible because of the kind of provision needed. It is estimated that about a quarter of patients live equidistant between the John Radcliffe Hospital and the Horton, but for the remaining patients we recognise that this will mean an inconvenience, and so we are looking at ways to offer various patient transport options in order to help. Inpatients at the Horton will be able to continue to have endoscopies in theatre. The work is expected to take approximately 16 weeks, starting in the autumn. We will communicate further once we have details on start dates and arrangements.

The full business case can be found here: [Full business case for redevelopment of the Horton Endoscopy Unit](#)

#### Phasing out of fax machines at OUH

The Trust has started the process of providing a secure channel of communications for sending clinically sensitive information. The aim is to improve the security of communications and ensure they are traceable to the end user and easily accessible. The project aims to identify non-essential fax machines and then phase them out.
You will be hearing from us within the next few months with more detail. In the meantime, if you haven’t already got access to a secure email address such as the nhs.net email address, this will be important in order to make referrals in the future.

This should not affect the referral process. All referrals made to the Trust for the majority of outpatient clinic services should continue to be done through the e-referral system (Choose and Book).

We hope to have completed this changeover by early 2016 and will keep you abreast of developments and any actions required on your part as we move forward. In the meantime, if you have any queries, please contact Hannah Minion on Hannah.minion@ouh.nhs.uk or Arnold Victor on Arnold.victor@ouh.nhs.uk

**Trial available for local osteoarthritis patients**

A trial led by the University of Leeds is looking for 160 people from around the country, including at least eight patients who will be recruited at the Nuffield Orthopaedic Centre. The trial is focused on patients who have osteoarthritis of the knee and is looking to find a more effective treatment for the future.

Arthritis Research UK are funding the trial which seeks to establish if methotreaxate, commonly used for rheumatoid arthritis can also be effective for osteoarthritis.

To find out more, please contact Dr Fiona Watt or the research team at the OA Trials Office on Tel: 0113 3924965 or email: otrials@leeds.ac.uk

For more on this please see: [Oxford osteoarthritis patients in new clinical trial](#)

**MSK Hub e-Referral Issues**

We apologise for the inconvenience you will have been experiencing with the new eReferral System. As you will have been aware we have had some teething problems. The latest reports show that it is working, albeit slowly, for 90% of the time. We have implemented contingency plans to allow for the time that the system is not available and this is causing a slight delay in the outcomes being sent out to the practices following face to face assessments. You can expect to receive an outcome within five working days until this improves.

There has also been an issue highlighted where referrals are showing on the practice systems (such as EMIS) as being attached and sent but they are not available on the eReferral system. To help with this we have sent out a spreadsheet showing all referrals that are missing from our records and also implemented an interim process whereby the practice will be contacted to be informed that there are missing referrals. It would be helpful if the practices also used the worklist available in eReferrals to monitor this and not rely solely on the information showing in EMIS.

A link to the “How To” guide can be found below: [www.ebs.ncri.nhs.uk/ers-help/index.htm](http://www.ebs.ncri.nhs.uk/ers-help/index.htm)

Using the Referring Clinician → Worklists → Outstanding referral letter options in the Index.

**Radiology referrals**

Please note that unfortunately OUH Radiology are unable to accept Xray referrals from non-medical staff such as Nurse Practitioners working from GP surgeries. This is due to IRMER - Ionising Radiation (Medical Exposures) Regulations 2000, which oblige the OUH to only take referrals from people who are registered dental or medical practitioners such as GPs. Other health professionals may be authorised to do this under strict protocols agreed by the employer (ie OUH). However, GP Nurse Practitioners are employed by their GP practices and so have no agreement with the OUH to refer patients. We wish to avoid situations such as one we had recently where a patient had to be referred back to their GP as the referral had incorrectly been made by a GP Nurse Practitioner. This is obviously inconvenient for the patient but unavoidable as this is a legal requirement.

3. Events and open days for patients and the public

**Annual British Transplant Games**
From **Thursday 31 July 2015 – Sunday 2 August 2015** the Annual British Transplant Games will be held in **Newcastle/Gateshead**. It is open to all Churchill Hospital transplant recipients and donors, so please let your patients know about this if you think they would be interested. More information can be found at [www.britishtransplantgames.co.uk](http://www.britishtransplantgames.co.uk)

**Trust Annual General Meeting**
*Thursday 17 September 2015 – refreshments from 5.30pm for a 6.00pm start*
Tingewick Hall, Level 1, Academic Centre, John Radcliffe Hospital, Headley Way, Oxford OX3 9DU
The Trust’s Annual General Meeting is open to the public and is an opportunity to come and meet the Trust’s Board of Directors as well as members of its Council of Governors, to hear a review of the previous year and to give feedback on future services. We will also have a talk on developments in the Trust’s cancer services from Dr Claire Blesing, Clinical Director for Oncology and Haematology. You and your patients are welcome to join us.

**Oxford Biomedical Research Centre Public Talks**
**Antibiotic resistance**
*Thursday 17 September 2015 – refreshments from 6.00pm for a 6.30pm start*
Lecture Theatre, Level 1, Nuffield Orthopaedic Centre
Professor Angela Brueggemann, Associate Professor at the University of Oxford’s Nuffield Department of Medicine, will discuss the issues around the increasing prevalence of antimicrobial-resistant bacteria in hospitals and the community. This talk is open to the public.

**Singing for Better Breathing** – singing group for those with lung conditions/breathing difficulties
*Fortnightly on Thursdays 11.00am – 12.00 noon*
OXRAD, Court Place Farm, Marston, Oxford OX3 0NQ
Do you have a patient with a lung condition or breathing difficulties? Singing can help. Songs are taught by ear, along with simple exercises to support better breathing. No experience necessary.

For further information please contact Liz 01865 792434 or email:
soundresourcecharity@gmail.com

Dementia Information Café at the John Radcliffe Hospital
*Once a month on the last Tuesday 2.00pm - 3.30pm*
Onthree (restaurant), Level 3, John Radcliffe Hospital
Do your patients visit a friend or relative with dementia in hospital, or care for someone with the condition? Do invite them to join us for tea, biscuits and an informal chat about the support available.

Help and advice is 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

4. Consultant appointments

- **Consultant in Neuropathology**
  Dr Monika Hofer MB ChB.

- **Consultant in Soft Tissue Tumour and Osteoarticular Pathology**
  Dr Zsolt Orosz MD Phd.

- **Consultants in Haematology (Haemostasis and Thrombosis and the second post with an interest in Haematopoietic Stem Cell Transplantation)**
  Dr Susan Shapiro BA BM BCh MRCP FRPath PhD and Dr Robert Danby BSc MB ChB DPhil MRCP FRCP

- **Consultant in Emergency Medicine**
  Dr Neil Dawson MB ChB.

- **Consultant in Clinical Infection**
  Dr Philippa Matthews BSc BMBS MRCP DTM&H FRCPPath DPhil.

- **Consultant in Clinical Oncology (Urology and Breast Clinical Oncology)**
  Dr Gerard Andrade MBChB MRCP FCR.

- **Consultant in Community Paediatrics**
  Dr Maria Finnis BSc Neuroscience, MBBS MRCPCH

- **Consultant in Gynaecological Oncology**
  Mr Pubudu Nilantha Jeevendra Pathiraja MBBS MRCS Part 1 MRCOG.

- **Consultant in Gastrointestinal Cellular Pathology**
  Dr Ruchi Tandon MB BS.

- **Consultants in Spinal Surgery**
  Dr Bedansh Chaudhary MBBS MSe FRCS and Dr Nuno Bastista MD FEBOT.
5. Trust news and service developments

**Publication of the Trust’s Business Plan**
The Trust’s Business Plan for 2015/16 has been approved by the Trust Board and submitted to the Trust Development Authority. You can see it on the Trust’s website: [Trust Business Plan 2015-2016](#). The corporate objectives are set out in Appendix B and include actions to address issues of concern to GPs.

**Foundation Trust Progress**
Members of OUH’s Board met members of Monitor’s Board in mid-July as part of the final stage of the regulator’s assessment of our readiness to operate as a Foundation Trust (FT).

As anticipated, we received a series of additional questions from Monitor, which seek to clarify issues that arose at the Board to Board meeting. We will be responding to these over the next couple of weeks. We are hoping that a decision can be made in the near future and we are continuing to take the final steps that will enable us to become an FT as soon as a decision is made by Monitor. Meanwhile, the [Council of Governors](#), which include a GP representative and a representative from the CCG, are getting ready to operate once authorisation takes place.

**Go ahead for new Satellite Radiotherapy Unit in Swindon**
At its meeting on 8 July the Trust Board agreed to support a satellite radiotherapy unit to be based at the Great Western Hospital in Swindon. The radiotherapy service will be a satellite of the OUH Cancer Centre based on the Great Western Hospital site, and will be greatly appreciated by the 700 patients a year from Swindon and Wiltshire who currently travel on a daily basis to the Churchill Hospital for radiotherapy.

*The launch of the fundraising appeal in Swindon in May 2015*

The proposal is still subject to the approval of the Trust Development Authority and NHS England in respect of the funding needed to support the development over the next ten years. For more see: [OUH gives go-ahead to satellite radiotherapy unit in Swindon](#)

**Review of maternity services following Kirkup Report**
The Kirkup Report was written following an independent investigation into the management, delivery and outcomes of care provided by the maternity and neonatal services at the
University Hospitals of Morecambe Bay NHS Foundation Trust from 2004 to 2013. There were some serious failings identified as part of the review.

We have reviewed our own maternity services in the light of the Kirkup Report and its recommendations. Our maternity services generally comply with the majority of the recommendations of the Kirkup Report. An action plan has been developed for those areas where there is still more work to be done.

For more information on this, please see the paper to the Trust Board in July: Kirkup Report 2015 gap analysis maternity services

Review of Trust policies and procedures following Savile
OUH received a letter in March 2015 from the Chief Executive of the Trust Development Authority (TDA) who wrote to all NHS trust chief executives to highlight the publication of the Lessons Learnt Report (post Savile). In line with these recommendations, we reviewed the report against our own practices, procedures and policies, developed an action plan where we need to improve anything and are ensuring that actions are taken in a timely manner.

For more on this read the Trust Board report: NHS Savile investigations – lessons learnt recommendations

Update on electronic discharge communications to GPs
Following on from previous briefings on this subject, we are planning to make an interim set of changes to the discharge summary in the next few weeks. These have been discussed with several GP representatives to enable some changes to be made quickly. These changes are aimed at improving the content in line with GPs’ comments. In the medium term we are planning a fuller consultation to make a further set of changes in line with your views.