News in brief

Keeping you up to date with the latest news, updates and developments from the Trust

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Monitor to investigate Trust's financial situation

Over the coming months we will be working with Monitor and our partners across the local healthcare system to understand why we are expecting a deficit and consider any actions which may help. This fresh look will be particularly helpful to ensure our plans as a healthcare system are strong and together we can make any necessary improvements.

Along with many other Trusts across the country, we are experiencing financial challenges and are now expecting to end the year with a £2.9 million deficit. There are a number of reasons for this, all relating to an extremely high and ever growing demand for our services.

This year we are working hard to manage a 15 per cent increase in unplanned activity compared to last year, this means we are now treating around 300 more unplanned patients each month. We are also spending money on agency staff, which is expensive, but necessary, to ensure we have the right numbers of staff, in the right places.

It is important to stress that Monitor have no concerns about our patient services or the quality of care we provide to our patients. In fact despite these challenges, we have maintained strong performance, good services and high quality care for patients.

Over the coming months we will be working closely with Monitor to provide assurances that our plans as a healthcare system are strong and together we can make any necessary improvements.



New dementia friendly ward at GWH

As part of a refurbishment programme, elderly care ward, Jupiter, has been transformed into a specialist dementia friendly ward thanks to a £98,000 ward redesign part funded by the Trust's charity Brighter Futures.

The new ward, which opened in November, has been transformed using the principles of Kings Fund research into dementia friendly design. The discreet adaptations have been proven to make a significant difference to the experience of patients with dementia and their families and carers. The new environment also took into account experiences of patients and staff and international best practice in dementia care and aims to reduce anxiety, improve confidence and support a speedier recovery.

Changes have been made to reduce the risk of falls, special clocks help patients distinguish between day and night and the ward has been made to feel more homely. The ward staff are now based closer to patients in each bay, allowing staff to respond more swiftly and offer patients constant reassurance.

The floor now has a matt, rather than shiny finish, to reduce falls. This is because people with dementia can struggle with depth perception, so whilst most people see a nice shiny floor, to those with dementia it could appear like there was water on the floor or movement.

Each bay is painted a different colour with an associated picture to make it easier for patients to recognise. While the condition affects sufferers' memory, their ability to remember colour and shapes is less affected.

In the near future the team will be piloting a project with volunteers to encourage more social interaction at meal times. This pilot is just one of the projects which will be funded by the £100,000 grant awarded to the Trust from the national Helping in Hospitals Programme.



New Prospect Hospice outpatient centre for Savernake Hospital

A new Prospect Hospice outpatient centre is set to open at Savernake Hospital next Summer, in a unique partnership which will see the hospice's outpatient services available in Marlborough.

It will mean people living with incurable illnesses will no longer have to travel to the hospice in Wroughton, as many do currently, for the care that helps them remain independent as their illness develops.

The Trust is providing the space for the centre, as part of its commitment to investing in community services across Wiltshire. The service will be staffed by Prospect Hospice nurses and therapists, supported by trained volunteers and will provide a range of services for patients and their families, including:

- Physiotherapy and occupational therapy
- Wellbeing days and complementary therapies
- Anxiety management, breathlessness and fatigue support
- Courses for carers and bereavement support.

Dr Guy Rooney, Medical Director, said: "The service will make a massive difference to local people and is just one of the ways we are making care more accessible to people across Wiltshire."

Angela Jordan, Chief Executive of Prospect Hospice, said: "We are very grateful to Great Western Hospitals NHS Foundation Trust for granting us this unique opportunity to extend the reach of our care."



New ophthalmology clinic opens in Swindon

A state-of-the-art eye clinic has opened at Eldene Surgery in Swindon giving eye patients more choice and access to a new service. The new clinic which opened to patients in October comes after the Trust Board approved a £1.6 million investment to provide 28 more clinics a week to meet the high local demand.

Nick Smith, Project Manager for Ophthalmology, Great Western Hospitals NHS Foundation Trust, said: "We are slowly expanding our ophthalmology services to meet the high demand and this new clinic is one of the first major steps to developing our service. Having a clinic in the local community means patients can receive the same high quality of care in a more convenient and comfortable setting."

Existing and emergency patients are still being treated at the Great Western Hospital, however since January 2014 new Swindon patients have been being referred elsewhere for treatment, until the Trust can increase staffing and the number of clinics. New Swindon patients are currently being referred for treatment to Cheltenham, Cirencester, Bristol or Oxford.

The Trust is continuing to work closely with Swindon Clinical Commissioning Group to monitor demand and it is hoped that the service at the Great Western Hospital will eventually open to new patients again in the future.



Flu vaccinations have started

A big priority for the Trust this time of year is protecting our staff, volunteers, students and patients from the flu virus. The occupational health team is looking to build on the success of last year's programme which saw 52% of staff having the flu jab and would like to see at least 75% of staff protected this year. So far almost 40% of staff have had the jab. (November)

For the first time this year peer vaccinators will be bringing the vaccine directly to the wards, making it more convenient for staff. The team will also be working their way around the Trust with lots of drop-in clinics. Medical Director, Dr Guy Rooney, is leading the way, being one of the first staff to have the jab this year by a peer vaccinator and he sent a personal message to staff though a short video on the intranet.

The jab is free for all Trust and Carillion staff, volunteers and students, whether on wards, in offices or in the community.



Family Nurse Partnership (FNP) set up for Wiltshire

A new scheme 'Family Nurse Partnership (FNP)' is being delivered by the Trust across Wiltshire to give first-time teenage mums and their babies targeted support. NHS England has commissioned the Trust to deliver the programme, which will benefit help mothers aged 19 and under from early pregnancy until their child is two years old.

The family nurses will show new mums how to have a healthy pregnancy, prepare for labour and support their baby's learning and development. They will also work with mums to ensure they get the right health and emotional care for themselves and their baby.

The programme is based over 35 year's research in the USA. Evidence shows the programme can boost the health of mother and child, and increase life-chances for the family, through children being better prepared for education and parents having improved employment prospects.

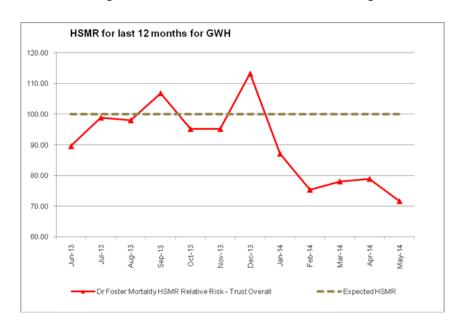


Improvements in mortality

Hospital Standardised Mortality Ratio (HSMR) is an indicator of healthcare quality that measures whether the number of deaths in hospital is higher or lower than expected. National data on HSMR is published monthly by Dr Foster Intelligence. For all hospitals, the expected mortality rate is set at 100 and if the number of deaths is lower than this, the HSMR will be below 100, a good outcome, suggesting good care.

For the last few years, our HSMR has been around 100 or just below, in 2013 it was 98. The most recent data shows our HSMR in May 2014 is 71.68. Individual months can vary a lot, but the trend over the last six months has shown consistent improvement. This suggests that more patients are surviving their illness than would be expected.

Over the last few years we have focussed on making sure that our clinical coding data, which is used to calculate HSMR is accurate, and that patients have access to end of life services in the community. We know these factors affect the HSMR value. We are now introducing changes in the care we provide for particular for conditions associated with high mortality rates, with the aim of saving lives. The Trust has also introduced mortality and morbidity meetings to ensure best practice and learning is shared. We are also looking at what other organisations and other countries are doing to lower mortality rates.





Success in tackling sepsis

One of the areas where mortality rates have improved is among patients with sepsis. On World Sepsis Day in September, staff across the Trust celebrated their progress a year on from the launch of their life saving campaign to tackle this life threatening condition.

Sepsis, previously known as septicaemia, can start from any minor infection, such as a chest or urine infection or an infected bite or wound and is difficult to diagnose. It claims over 37,000 lives a year in the UK, but despite claiming more lives than breast and bowel cancer combined, awareness is low. With sepsis, the sooner treatment begins the better the outcome. If not treated within six hours it can be fatal.

Over the past year use of the 'Sepsis Six', a set of six internationally recognised clinical interventions performed within the first hour of severe sepsis being diagnosed, has become embedded across the hospital. Simple interventions including antibiotics, oxygen and intravenous fluids, help to increase survival by up to 30 per cent. Just four patients receiving antibiotics within an hour will result in one additional life saved. Since a dedicated sepsis nurse, funded by Brighter Futures, came into post in May 2014 the improvement in timely antibiotic administration has resulted in 26 extra lives saved.

Since the Sepsis Six was launched in September 2013, we have reduced the likelihood of dying from Severe Sepsis by over half. Our latest data from September 2014 suggests around 80% of patients admitted to Great Western Hospital with Severe Sepsis are surviving, compared with around 37% when our baseline data was compiled (based on 50 patients admitted between August 2013 and February 2014).

To learn more about sepsis, visit the UK Sepsis Trust website - sepsistrust.org



Spotlight event in Devizes

Around 20 people attended the Trust's second Spotlight event, hosted in partnership with Healthwatch Wiltshire, at Devizes Town Hall in September to share their views on the Trust's community services.

Attendees took part in a series of honest roundtable discussions. At the end of the evening, each group was asked for their most positive experience of community healthcare, as well as what they thought was the biggest challenge for the Trust.

The roles of Care Coordinators in the community were praised along with the Dermatology Clinic at GWH, which was commended for its flexibility when booking appointments. Communication between staff and patients was identified an area for improvement, as was the way patients are discharged from hospital and having the right care in place when patients return home.

All feedback is now being used to identify areas for improvement and build on areas which are working well for patients, their families and carers. A summary of feedback is published on the Trust's website.



Bringing chemotherapy closer to home for people across Swindon and North Wiltshire

Cancer charity Hope for Tomorrow has donated a £260,000 state-of-the -art mobile chemotherapy unit to the Trust. The fantastic facility will make an enormous difference to our patients, giving people more choice and convenience.

Each week it will visit Calne, Marlborough and three different locations around Swindon currently being decided. It will spend one day in each location and around eight patients a day will benefit from the new mobile service.

The new unit is named 'Linda', after the late wife of Captain Dan Conley, who cut the ribbon to officially open the unit in a special ceremony at the Great Western Hospital in September.



Duty of Candour becomes legal requirement

Of the 1.4 million patients we care for every year across Swindon and Wiltshire, we know that the vast majority of them receive high quality care, however on rare occasions mistakes can happen. We know that openly and honestly recognising, discussing, and examining mistakes leads to improved patient safety. This is why we encourage staff to report mistakes and we publish never events and share learning.

We already follow a Being Open policy, however the introduction of the Duty of Candour at the beginning of October has made being open a legal requirement. The Duty of Candour says that all staff must be open and transparent with patients about the care they receive, even when things go wrong. For us, this means when things go wrong, we tell patients and relatives what has happened, apologise and explain what action will be taken.

Under the new law, staff must take the following steps as soon as possible following an incident:

- Inform the patient or their family that an incident has occurred
- Acknowledge, apologise and explain the incident
- Provide information
- Provide reasonable support.

The Care Quality Commission will monitor our compliance so it is important that we continue to encourage a culture of openness and transparency.



Recruitment update

Since our recruitment drive began in April 2013 we have recruited 356 nurses, as well as 53 midwives and 72 doctors (excluding junior doctors). This means we have 82 more nursing and midwifery staff on our wards and in the community than we did last year. (Figures as of 30 September 2014)

Over the past year, many more local nurses have chosen to join us and we've recruited some really experienced nurses from abroad – Spain, Portugal and Ireland. We have just completed another recruitment drive in Spain, Portugal and Italy.

We're putting a significant amount of time into getting more staff onto our wards and into the community; however, recruiting nurses in particular is a challenge, due to a national shortage of qualified and experienced nurses.

We will continue our efforts to recruit nurses with the qualities we value – kindness, compassion and professionalism – until we have all of the nurses we need.



Return to Practice

To support our recruitment efforts, we are offering local nurses, midwives and health visitors the chance to get back into work with a new programme, Return to Practice.

This free course, designed for nurses, health visitors or midwives who have had a break from their profession, offers the support, guidance and training needed to get back to work. For those who choose to return to practice following the programme, bursaries of £1,000 for nurses and £500 for midwives and health visitors are available.

Run by the University of the West of England in Bristol, the programme has already taken place in October and further opportunities are available in January 2015 and May 2015. Attendees must attend six study days including a session in the simulated clinical area and a two-day induction with the Trust. Six delegates completed the October course.



Performance

Hospital associated infections

NHS England announced last year that a point has been reached where preventable MRSA bloodstream infections should no longer be acceptable in the NHS. The Trust therefore has a zero tolerance approach to Meticillin Resistant Staphylococcus Aureus (MRSA) and since 1 April 2014 the Trust has not reported any cases.

The Sepsis Six means patients with symptoms of sepsis are now having their blood tested earlier in their hospital stay, which can help to reduce hospital associated infections and improve the patient outcome.

Clostridium difficile or (*C. difficile* or *C. diff*) is a bacterium that is found in the intestines. It does not cause disease by its presence alone and can be found in around 3% of adults and two thirds of babies with no symptoms. It causes disease when the normal bacteria, with which C. difficile competes, are weakened, usually by antibiotics. This means the *C. difficile* can grow to unusually high levels, allowing the toxin they produce to reach levels where it attacks the intestine and causes symptoms of disease.

The Department of Health have set a target for the Trust to report no more than 28 cases this financial year (2014/15). As of 8 October the Trust has reported 11 cases, which means we are under trajectory.

Waiting times from referral to treatment

Over the most recent quarter (July to September 2014) we have significantly reduced the number of patients who have been waiting over 18 weeks for their operation from 1,030 at the end of June to 243 at the end of September. This reduction meant that the Trust did not meet the national target of treating 90% of patients within 18 weeks of referral; however it means waiting times have reduced overall and will be more sustainable in the future.

Emergency department waiting times

For the most recent quarter (Q2 – July, August and September), we treated or admitted 96.7% of patients within four hours of arrival to the emergency department. This is good news, meaning we achieved the 95% target.

This was despite the emergency department seeing a 3.4% increase in attendances in Q2 this year, compared to last year, this equates to an extra 660 attendances.