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## **Press Statement**

17 October 2007

### **Annual Health Check – RUH moves on**

Chief executive of the Royal United Hospital Bath NHS Trust (RUH) James Scott says: “The Healthcare Commission’s Annual Health Check is about assessing the quality of care we are providing for our patients and how well we use our resources. The way in which these assessments are made masks good performance in many areas of the hospital. The RUH has also made significant progress since the period covered by the Health Check. What matters to our patients is the quality of care and treatment they can expect to receive at the RUH. I believe that the public can have real confidence that this is a good hospital providing excellent clinical care and with a strong grip on its finances.”

### **Tackling hospital acquired infections:**

Tackling hospital acquired infections is a major concern to the public and this is also a top priority for the RUH. Although the trust did not meet the Healthcare Commission target for MRSA last year it has made huge progress in reducing the rates of hospital acquired infections. Year on year MRSA bacteraemia rates are falling and there has been similar success in tackling Clostridium Difficile (C.Diff). Key actions have included monitoring use of antibiotics, prompt isolation of patients with C.Diff, ensuring high levels of cleaning, including annual deep cleans of all wards and the recent opening of a new cohort ward. From average monthly rates of around 40 cases of C Diff at the start of the year, in September the RUH recorded just eight, the lowest figure since information was first collected in 2003. This compares very well with national figures.

**Financial Achievements:**

The Annual Health Check presents a picture of the performance during the year April 2006 to March 2007 in relation to a number of targets. During this period and for the first time in fourteen years, the RUH broke even and also achieved a rating of 'good' in three of the five indicators on money. However because of its historic debt, which the trust has started to repay, the RUH was not able to achieve a better overall rating than 'weak'. This fails to recognise the efforts of staff who worked incredibly hard last year to achieve financial balance.

**Quality of Care – waiting time targets:**

Looking at the assessment for quality of care the RUH's overall 'weak' rating reflects problems with some waiting time targets. The trust is already working hard to improve in these areas. In particular the RUH is working closely with local PCTs and social services to tackle waiting times in A&E and to reduce the number of patients experiencing delays in their discharge from hospital.

These ratings do not however do justice to areas where the RUH has performed well and improved on last year's assessment. For example the trust met all three national cancer targets and also substantially reduced the times patients have to wait for diagnostics. Most patients now receive their MRI or CT scans within 9 weeks and this will be further reduced to just four by March 2008.

**Committed to providing safe, high quality care:**

John Waldron, medical director at the RUH adds: " I would like to reassure the public that I, as medical director, and Francesca Thompson, as director of nursing have patient safety as our top priority. RUH patients and their relatives can have every confidence that the RUH is a good hospital dedicated to providing safe, high quality care. "

Last year the RUH continued to do well in the Dr Foster hospital guides. It was rated amongst the best performing hospitals in the UK for safety and

quality of care, with expected mortality between 2003 – 2006 reported as 'low'. This means that for the same procedures, the relative risk of dying was low at the RUH in comparison with all other hospitals in the country. These low mortality rates are consistent with the latest published results of national audits for intensive care which rate the RUH intensive care and newborn intensive care units as amongst the best in the country. The breast unit also performed extremely well in the Dr Foster Breast Cancer Guide 2006 whilst the RUH again received a CHKS Top 40 Hospitals award for the third year running.

### **Priorities for the future:**

Looking forward the trust board has agreed three key priorities for this financial year. The RUH is committed to patient safety, especially tackling hospital acquired infection; reducing waiting times for patients and maintaining financial balance. This is a challenging agenda but one that the trust is confident that it can achieve.

Ends

**Issued by RUH communications and media relations team**  
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### **Notes to Editors:**

#### **Finances - breaking even**

For the first time in its 14 year history the RUH broke even in 2006/07 and reported a small surplus of £144,000 compared with a deficit of £7.3m in the previous year. This significant milestone was achieved following a successful savings programme of £14.5m which was identified and implemented across all areas of the trust.

During 2006/07 the trust also reduced its management costs as a percentage of the trust's income (from 4.32% in 2005/06 to 4.00% in 2006/07) and improved performance in the payment of suppliers.

#### **Success in meeting key access targets**

As well as achieving financial balance the trust continued to make progress across a range of key national targets. Waiting times were reduced to 20 weeks for nearly all those waiting for their inpatient or day case operations and significant progress was made in reducing cancelled operations. For those waiting for first outpatient appointments times were reduced to eleven

weeks. In particular waiting times were drastically reduced for patients needing endoscopy treatment.

All three key access targets for cancer care were met - covering the 14 day referral to appointment target, 31 day treatment time target, and the 62 day target from urgent GP referral for suspected cancer to first treatment. 100% of patients who needed rapid access to chest pain clinics were also seen within the required two weeks.

### **Tackling hospital infections**

This continues to be a top priority for the trust. Figures published by the Health Protection Agency in July showed that the RUH was making real improvements but due to the number of cases early in the year the trust missed the overall annual target.

Achievements include the implementation of an effective MRSA action programme which the Department of Health asked the trust to share nationally as an example of good practice. Activities included the running of high profile campaigns for staff, patients and visitors to raise awareness of infection control and highlight the importance of good hand hygiene.

In September the trust also introduced new more restricted visiting arrangements to help make the hospital cleaner and safer for patients

### **Listening to our patients**

The hospital and its staff aim to put patients at the very heart of everything it does and to involve them in all aspects of their care. Patient feedback helps the hospital to review and improve services and more closely meet the needs of patients and their relatives.

Last year the trust set up a new patient experience group; to help focus on how to make the best use of the hospital environment, support services and customer care. Patients are also encouraged to give views and opinions of their care in the Healthcare Commission's annual patient surveys.

In the most recent inpatient survey nine out of ten patients rated their care at the RUH as good or better. Most of those who responded to the survey had trust in the doctors and nurses treating them and believed they were cared for with dignity and respect.

As part of a new initiative patients in the discharge lounge waiting to leave the hospital will be interviewed by senior nurses. This will help the hospital gain a better understanding of how patients rate their care, highlight any areas of concern and monitor where the trust is improving.

### **New expanded services provide more local treatment for cardiac patients**

Cardiac services were expanded with the appointment of two further cardiologists and the installation of a second cardiac catheter laboratory, officially opened in 2006 by the Secretary of State Patricia Hewitt. This expansion has increased capacity to diagnose and investigate patients with

angina and possible coronary heart disease. The RUH can also now offer a new coronary angioplasty service to local patients who would otherwise have had to travel to Bristol for their treatment. Waiting times have been drastically reduced and the RUH is on track to achieve 18 weeks from GP referral to treatment target .

### **New state-of-the-art Picture Archiving and Digital Communications System**

In February the RUH introduced a state-of-the-art Picture and Archiving and Digital Communications System on time and within budget. PACS is the most significant change in medical imaging since the discovery of x-rays and enables images such as x-rays and scans to be stored electronically and viewed on standard computer screens. It is already making a huge contribution to improving and modernising patient care and transforming the way clinicians and staff work both in the RUH and in the wider health community.

### **New scanning facilities**

During the last year, staff worked hard to successfully reduce the times patients have to wait for diagnostic tests. The majority of RUH patients now receive their MRI or CT scan within 9 weeks and Endoscopy waits down to 5 weeks, with those identified as urgent receiving scans even more quickly.

After a highly successful fund-raising campaign by the Hospital's Forever Friends appeal a second CT scanner was delivered in June of this year and has been installed in a new scanning suite. This new scanner along with an extension to the use of the hospital's second MRI scanner will reduce waiting times to a maximum of four weeks by March 2008.