## Appendix A

## NHS TRUST:

Portsmouth Hospitals NHS Trust
Trust Headquarters
Queen Alexandra Hospital
Southwick Hill Road
Portsmouth
PO6 3LY

## DECISION:

On the basis of the grounds set out below and pursuant to the powers exercisable by NHS Improvement under or by virtue of the National Health Service Act 2006 and the TDA Directions, NHS Improvement has decided to accept undertakings from the Trust.

## BACKGROUND:

NHS Improvement accepted undertakings from the Trust on 17 April 2020. Since then the Trust has made some progress, particularly in relation to quality standards. The remaining undertakings are deemed to no longer be effective as a means of securing compliance with the conditions of the Licence due to the passage of time and intervening events.

Despite some evidence of progress, NHS Improvement continues to have concerns about urgent and emergency care particularly in relation to ambulance handover delays and bed occupancy. NHS Improvement is now taking regulatory action in the form of these updated undertakings which replace and supersede the April 2020 undertakings.

## DEFINITIONS:

In this document:
"the conditions of the Licence" means the conditions of the licence issued by Monitor under Chapter 3 of Part 3 of the Health and Social Care Act 2012 in respect of which NHS Improvement has deemed it appropriate for NHS trusts to comply with equivalent conditions, pursuant to paragraph 6(c) of the TDA Directions;
"NHS Improvement" means the National Health Service Trust Development Authority;
"TDA Directions" means the National Health Service Trust Development Authority Directions and Revocations and the Revocation of the Imperial College Healthcare National Health Service Trust Directions 2016.

## GROUNDS

## 1. The Trust

The Trust is an NHS trust all or most of whose hospitals, facilities and establishments are situated in England.
2. Issues and need for action
2.1. NHS Improvement has reasonable grounds to suspect that the Trust has provided
and is providing health services for the purposes of the health service in England while failing to comply with the following condition of the Licence in relation to urgent and emergency care: FT4(5)(c).

### 2.2. In particular:

2.2.2 the Trust has been identified as having high numbers of $>60$ minute ambulance delays (4,060 hours lost to handover delays in October 2021), requiring the Trust to participate in a national escalation meeting with the national urgent and emergency care team.
2.2.3 the ambulance handover delays have had a direct impact on patient safety, evidence by five Serious Incidents relating to handover delays at the Trust;
2.2.4 Bed Occupancy at the trust remains high and has been $99.2 \%$ to $100 \%$ through October/November 2021; and
2.2.5 despite successive attempts to address performance issues in relation to urgent and emergency care (including ambulance handover delays) and bed occupancy, the Trust remains a significant outlier nationally.
2.3. These failures by the Trust demonstrate a failure of governance arrangements, including in particular, a failure to establish and effectively implement systems and/or processes to ensure compliance with health care standards binding on the Trust.

### 2.4. Need for action:

NHS Improvement believes that the action which the Trust has undertaken to take pursuant to these undertakings, is action required to secure that the failures to comply with the relevant requirements of the conditions of the Licence do not continue or recur.

## UNDERTAKINGS

## 3. Urgent and Emergency care

3.1. The Trust will take all reasonable steps to eliminate $>60$ minute ambulance handover delays and substantially reduce all delays over 15 minutes' and keep bed occupancy rate to a level which would reasonably be regarded as safe for the patients and appropriate for a supplier of healthcare services to the NHS.
3.2. In meeting the requirements of paragraph 3.1, the Trust will work with system partners in the Hampshire and Isle of Wight Integrated Care System to develop a robust System Improvement Plan (SIP), to be agreed with NHS England and NHS Improvement, that will address the performance issues in relation to urgent and emergency care (including ambulance handover delays) and bed occupancy rate.
3.3. The Trust will submit the SIP by a date to be agreed with NHS England and NHS Improvement. The SIP will include key quality and performance indicators to be agreed with Systems partners and NHS England and NHS Improvement, and which will be used to demonstrate the improvement in emergency care performance (including ambulance handover delays) and bed occupancy rate which will be needed to meet the requirements of paragraph 3.1.
3.4. The Trust will take all reasonable steps to complete its actions as set out in the SIP, within timescales to be agreed with NHS England and NHS Improvement.
3.5. In meeting the requirements of paragraph 3.1 the Trust will, in conjunction with system partners, keep under review and regularly update the SIP as agreed by the Trust Board, with System partners and with NHS England and NHS Improvement.
3.6. In meeting the requirements of paragraph 3.1 , the Trust will take all reasonable steps to deliver the levels of emergency care performance outlined in the NHS Operational Planning and Contracting Guidance 2022/23 and provide high quality care for patients.

## 4. Improvement Director

4.1 The Trust will cooperate and work with any Improvement Director appointed by the NHS England and NHS Improvement to work with the Trust to oversee development and delivery of the SIP.

## 5. Meetings and reports

5.1. The Trust will attend meetings or, if NHS England and NHS Improvement stipulates, conference calls, at such times and places, and with such attendees, as may be required by NHS Improvement.
5.2. The Trust will provide such reports in relation to the matters covered by these undertakings as NHS England and NHS Improvement may require.
Any failure to comply with the above undertakings may result in NHS England and NHS Improvement taking further regulatory action. This could include giving formal directions to the trust under section 8 of the National Health Service Act 2006 and paragraph 6 of the TDA Directions.

## THE TRUST

Signed


Penny Emerit
Chief Executive of Trust
Dated 17 May 2022

## NHS ENGLAND AND NHS IMPROVEMENT

Signed


David Radbourne<br>Regional Director of Strategy and Transformation<br>NHS England and NHS Improvement - South East

Dated 17th May 2022

