

## **Revised s.106 enforcement undertakings (February 2020)**

### **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.

### **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.

### **GROUND**

#### **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, the Trust has not achieved the relevant A&E national standard for several years. The Trust does not have a comprehensive urgent care improvement plan in place with which to address performance issues in relation to urgent and emergency care.

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 deliver a standard of emergency care which would reasonably be regarded as appropriate for a supplier of healthcare services to the NHS.

3.2. In meeting the requirements of paragraph 3.1 the Trust will, in particular, keep under review and regularly refresh its comprehensive Urgent Care Improvement Plan (“UCIP”), regularly update the UCIP as agreed by the Trust Board and by NHS Improvement and demonstrate that it can deliver that plan.

3.3. The UCIP will include key quality and performance indicators, to be agreed with NHS Improvement, which will be used to demonstrate the improvement in emergency care performance which will be needed to meet the requirements of paragraph 3.1.

3.4. In meeting the requirements of paragraph 3.1, the Trust will take all reasonable steps to deliver the minimum levels of emergency care performance outlined in the NHS Operational Planning and Contracting Guidance 2020/21 and provide high quality care for patients in a manner which is financially sustainable for both the Trust and its lead commissioners.

3.5. The Trust will develop a quality improvement plan to address the ‘Must Do’ actions from the January 2020 CQC report in relation to the emergency department, in consultation with relevant stakeholders and agreed by the Trust Board by a date to be agreed with NHS Improvement.

3.6. The Trust will demonstrate that it can deliver the plan and will agree timescales for delivery with NHS England and NHS Improvement.

### 4. Meetings and reports

4.1. The Trust will attend meetings or, if NHS Improvement stipulates, conference calls, at such times and places, and with such attendees, as may be required by NHS Improvement.

4.2. The Trust will provide such reports in relation to the matters covered by these undertakings as NHS Improvement may require.

Any failure to comply with the above undertakings may result in 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



Mark Cubbon  
**Chief Executive of Trust**

Dated 26 March 2020

## **NHS ENGLAND AND NHS IMPROVEMENT**

Signed



**David Radbourne**  
Regional Director of Strategy and Transformation  
NHS England and NHS Improvement - South East

Dated 17 April 2020