

# Patient focus...

The newsletter for patients and our foundation trust members. *Special issue: March 2012*

## Children's cardiac services update

It is now over a year since the Joint Committee of Primary Care Trusts (JCPCT) published recommendations for the reconfiguration of children's heart services in England. As reported in the last issue of *Patient Focus*, Mr Justice Owen upheld our challenge of the Safe and Sustainable consultation on children's heart surgery services. This was on the grounds that the research and innovation score attributed to Royal Brompton was based on an inaccurate assessment of the Trust's research output, therefore distorting the consultation.

The JCPCT is appealing the result of the judicial review and the appeal is scheduled for 19 or 20 March. We remain confident that we have a strong case.

### Support for the Trust

We continue to receive valuable support from sources at home and abroad. Dr Neil Gibson, consultant in paediatric respiratory medicine at the Royal Hospital for Sick Children in Glasgow, secretary of the British Paediatric Respiratory Society, and member of the Pollitt panel that advised on the knock-on effects on respiratory services if children's cardiac services are removed, recently wrote to the chair of the JCPCT. Expressing his concerns that the panel was "asked to answer a very narrow question", Dr Gibson said: "The paediatric respiratory research unit at Royal Brompton Hospital is truly one of the world's leading centres with an already impressive track record and a current set up that is likely to be part of delivering some fundamentally important research findings and treatment innovations

for relatively common conditions. I fear there is a very real threat to that work from the implications of removing cardiac surgical services."

Professor Ernst Eber, head of the Paediatric Assembly of the European Respiratory Society, also wrote to the JCPCT, expressing his concerns about the impact on research if Royal Brompton was to lose children's cardiac surgery. Professor Ernst said: "The quality of the current paediatric respiratory research programme at Royal Brompton Hospital is truly outstanding... it takes years to build a world class unit, and all this can be thrown away very quickly."

### Other support

Strong support from MPs, local councillors and several leading charities has been very valuable over recent weeks. The Cystic Fibrosis Trust, Asthma UK, the Muscular Dystrophy Campaign and

Primary Ciliary Dyskinesia Family Support Group have been particularly vocal in their support.

### What can you do?

- Please share your experiences of care at our hospitals via NHS Choices – [www.nhs.uk](http://www.nhs.uk).
- Follow us on Twitter – [@rbandh](https://twitter.com/rbandh).
- Consider sharing your story with the local media. If you would like to do this please contact **Jessie Mangold**, head of media relations, **020 7351 8672** or [j.mangold@rbht.nhs.uk](mailto:j.mangold@rbht.nhs.uk).
- If you have not already done so, please write to your MP and register your views on the proposed plans.
- Recruit another Trust member to spread the word.
- If you think our staff have gone the extra mile, why not write and tell them?



# Fundraising to thank PICU

The Octavia Appeal for The Friends of Royal Brompton Hospital is raising money to buy items for the paediatric intensive care unit (PICU) and Rose Ward.

Octavia was born in October 2009. After contracting bronchiolitis her lungs failed and she spent a month on PICU during her first winter.

Her mother, Lynda Mackie, says that during that time it was very much "touch and go". Octavia is now a happy and healthy two year old.

Following this experience Lynda has been fundraising and is

particularly keen to provide extra chairs for visitors on PICU and Rose Ward, decorate new sleep labs and support the *SPRinT* team resuscitation training project.

**“ The care we received in PICU was amazing and we owe a lot to the dedicated team of doctors, nurses and support staff who helped us during that time ”**

*Lynda Mackie*



Two-year-old Octavia pictured recently

More than £12,000 has so far been raised by local children and businesses. Lynda hopes that the appeal will raise £30,000 by Easter.

Lynda said: "The appeal is our way of giving something back." For more information about the appeal, contact Lynda Mackie – [lyndacmackie@tiscali.co.uk](mailto:lyndacmackie@tiscali.co.uk)

## Trust highly rated by patients

The 2011 National Outpatient Survey results were released by the Care Quality Commission (CQC) in February.

The Trust's outpatient departments scored nine out of 10 for patient satisfaction, which puts us in the top performing 20 per cent of trusts in England.

In the survey, which is conducted every two years, patients were asked questions relating to an

outpatient visit they had attended in May 2011. The CQC's report uses a score out of 10 and three simple statements – "worse", "about the same" and "better" to show how well each trust's performance compares to other trusts.

Most encouragingly, patients gave a score of 9.48, out of a possible 10, for being treated with dignity and respect throughout their outpatient experience.

To view the full report, visit the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk). The survey results for all other trusts are also available.

## Governor elections

Governor elections will be held this spring. There are a total of 12 constituencies (three public, five patient/carer, and four staff), and all Trust members are eligible to stand. Our governors work with board members and senior staff to help improve patient care and to give their views on the future direction of the Trust. The term of office is three years.

If you would like to stand for election or would like more information, please visit [www.rbht.nhs.uk/elections](http://www.rbht.nhs.uk/elections) or email [governors@rbht.nhs.uk](mailto:governors@rbht.nhs.uk).

## Trust rewarded for quality care

The Trust has also been named as one of only two acute trusts in London to be given extra funding as a reward for high quality care.

The Commissioning for Quality and Innovation (CQUIN) payment framework enables commissioners to reward excellence by linking a proportion of providers' income to the achievement of local quality improvement goals.

The Trust agreed 10 goals with the commissioners for 2010/11, a mix of two nationally mandated, four regionally selected and four locally developed indicators.

We once again achieved our target of being in the top 20 per cent of trusts in responsiveness to patient needs (a national indicator measured through the NHS inpatient survey). We also achieved 100 per cent in the reporting of pressure ulcers, far exceeding the locally set indicator.

The Trust achieved all of its CQUIN indicators and as a result received the full allocation of quality care funding from the government last year – a total of £2.7 million. This is an excellent achievement and demonstrates the continuing commitment of



staff and management to the Trust's values.

Chief executive, Bob Bell, commented: "It is only by maintaining a strong focus on quality and safety that we are able to provide the best possible specialist care for our patients."