July 2026

University Hospitals Dorset
NHS Foundation Trust

The Brief

Get ready to welcome your improved app

Your UHD Staff App is getting a refresh! We've focused on making it faster, simpler and more intuitive, with a fresh new look and improved functionality to help you access all the things you regularly use as well as keeping you up to date with the latest Trust news.

To find out more about these changes click here.

New date announced for Phase 3 moves

Clinical vision of flow to enable April 2027 transition

We're pleased to announce that phase 3 moves are now planned to take place in April 2027.

Phase 3 will go ahead in April, regardless of whether the Coast Building is complete. This will be enabled by adopting a new approach to working, known as Clinical Vision of Flow, which will help us deliver safer and more responsive care.

The Clinical Vision of Flow is a Trust-wide way of working that will help ensure patients receive the right care at the right time, reduce unnecessary hospital stays and support timely discharge when patients are ready to leave hospital. Based on approaches that have delivered positive results in hospitals around the world, teams across UHD are now developing and testing the model to ensure it works for our patients and services.

Mark Mould, Chief Operating Officer, said:

"I am excited to see this work come to life. This shared clinical vision will help us deliver reliable, proactive and responsive care, while bringing teams together around a common purpose and making the best use of our collective resources."

You can read the Clinical Vision of Non-Elective Flow here. You can also watch Dr Ian Sturgess' presentation on achieving quality flow here.

If the Coast building is not ready, four wards will move into the Coast Building once construction has finished, allowing the wider transformation programme to continue moving forward.

To proceed with the April 2027 moves, we will need to achieve our agreed reduction in hospital bed days through the successful implementation of the Clinical Vision of Flow. A final decision will be made in **October 2026**.

The revised Phase 3 timetable means that **Phase 4** construction work, including planned improvements at Poole Hospital and its operating theatres, will begin later than originally planned.

See our patients sooner

Be a great place to work

Improve patient experience, listen and act

Save lives, improve safety

Use every NHS pound wisely

Your University Hospitals Dorset

An update from our Chief Executive, Siobhan Harrington

'Creating the conditions for safe, timely and compassionate care'

Welcome to your July edition of The Brief. Each month, I consider whether there is a thread that ties together my updates to you. Sometimes this is a challenge, but this month it's really clear - it's how we link together **performance, safety, quality** and **culture**, as they can never operate alone.

We are launching UHD's new Clinical Vision of Flow, a Trustwide vision for how we work together to deliver timely, safe and effective urgent and emergency care. We want patients to receive the care they need more quickly, avoid unnecessary admissions wherever possible, and experience timely discharge when they are ready to leave hospital.

If we can get our Clinical Vision of Flow right, then we can complete our major service moves in April 2027, regardless of the completion of the Coast Building. And this is what we intend to do.

Being adaptable to change is essential. But we can only make meaningful changes if we listen.

The recent publication of Baroness Amos' independent investigation into maternity and neonatal services, as well as the Ockenden Review, make sobering reading. Behind every recommendation is a patient, a family and an experience that should have been better.

While the focus of these reviews was on maternity care, the lessons are far broader. This is about listening to patients and families, hearing every voice, maintaining robust governance, strengthening accountability, and ensuring our Board has clear oversight of quality and safety.

Crucially, it's also about our culture. Strong cultures are built when people feel able to speak up, raise concerns and contribute to improvement. Indeed this is the essence of Patient First and the focus of the UHD questions in this month's People Pulse survey.

I'm proud of many things here at UHD, but we don't get things right all the time, or everywhere. Creating strong cultures ultimately comes down to civility, and this is a daily ask of all of us. One of the 'Civility Saves Lives' co-founders is joining us for our second UHD Patient Safety Conference, taking place on 16 September. The theme this year is Together for Safety at UHD: **Connecting People and Processes** - again we see a thread.

▲ Team UHD has been writing our Clinical Vision of Flow

Supporting a strong culture also means ensuring TeamUHD has access to support, so this year we're expanding our Thrive Live Health and Wellbeing fair to three weeks. Please do release your teams to take part where possible - if we're going to ensure our patients are cared for in the right place at the right time, we need teams who feel supported, respected, and empowered to do their best work.

So back to performance, safety, quality and culture.

How we **perform** directly impacts on the care our patients receive. It relies not only on our clinical expertise and processes, but on how we work safely together to improve the **quality** of that care, within a **culture** of openness and improvement.

Time to act. Thank you for everything,

Siobhan

▶ Thrive Live is getting bigger!

Vital statistics June

- We saw **47,927** patients in our outpatient departments
- ...and an additional 9,993 virtually
- Carried out **1,918** day case procedures
- Supported the birth of more than **330** babies
- Attended to **15,936** patients in our emergency departments
- Cared for **210** patients at the end of their lives
- Started **217** patients on their radiotherapy journey

Thank you #TeamUHD

Locking eDischarge summaries – a collective effort

We all have a responsibility to ensure we **complete and lock** electronic discharge summaries for our patients.

If we do not lock them, **GPs do not know what has happened to their patients and we cannot safely handover care**. Their information also won't be accurate in the Dorset Care Record.

As part of our work to tackle a significant backlog of unlocked discharge summaries, we have been looking at all the processes for locking these across our hospitals to find a clear framework to move us forward.

Please note:

- eDischarges must be prepared (practically complete) the day before the patient goes home where applicable, along with their TTOs, to help get people home by midday
- generally, eDischarges should be **locked** by ward staff or discharge leads at the point our patients leave
- if a clinician has written a discharge summary for a patient who has died, they can **lock this**
- if a clinician is writing a summary for a patient who has already left our hospitals, they can **lock this**

Clear guidance is being drafted by our clinical, nursing and safety teams and a template will be provided to support different practices. We will share this with you as soon as possible.

We need **to work collaboratively** to get this right for our patients, and to ensure we don't increase the number of unlocked discharge summaries.

Thank you for your support in this essential safety process.

***Dr Becky Jupp**, Deputy Chief Medical Officer,*
*and **Sarah Herbert**, Chief Nursing Officer*

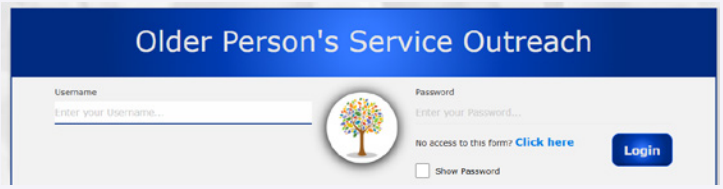
New ePortal referral system improves Older Persons Services

A new electronic referral system has been introduced to improve the safety, efficiency and timeliness of referrals to the Older Persons Services outreach/admission avoidance team.

The ePortal referral form, which launched on 6 July 2026, replaces the previous Microsoft Teams and paper-based process, reducing administrative delays, improving confidentiality and lowering the risk of errors when handling patient information.

The new system provides a clearer referral and triage process. The outreach referral form will be accepted from therapy staff at RBH on the OPS wards, ED and SDEC colleagues only. The use of the form will enable a more accessible and timely transition between acute service departure and discharged patients being seen for outreach assessment.

Click here to use the new ePortal form.



Join us for our UHD Patient Safety Conference

We are delighted to invite colleagues to our 2026 UHD Patient Safety Conference on **Wednesday 16 September**, 9.15am-4pm, at the Village Hotel, Bournemouth.

This free event is an opportunity to listen to some fantastic UHD and external speakers and join collective discussions on safety culture. Topics include:

- Civility Saves Lives
- How we involve patients in patient safety learning
- How we use the right language with patients and colleagues
- How data can enhance safety
- Lived experiences of safety events in our hospitals

To find out more and to register for free, click here

Making every appointment count in the antenatal clinic

Heng Williams, a Maternity Support Worker in the Antenatal Clinic, has been leading a Patient First improvement project to help reduce missed appointments in the Glucose Tolerance Test (GTT) clinic.

After noticing a high number of cancellations and Did Not Attends (DNAs), Heng worked with colleagues to understand the reasons behind them. The team identified common challenges such as patient availability, communication barriers, administrative errors, and difficulties meeting the fasting requirements. Using the Patient First A3 improvement tool, Heng was able to present clear, evidence-based recommendations to help improve attendance and the patient experience.

This project is a great example of how Patient First is empowering teams across maternity services to make positive changes. Through improvement training, regular team huddles, and shared learning sessions, staff are encouraged to share ideas and work together to solve everyday challenges. As the recommendations are put into practice, the team hopes to reduce missed appointments, improve access to screening for pregnant women, make the clinic run more smoothly, and ensure NHS resources are used as effectively as possible.

Read more here.

Patient First

Provide excellent healthcare. Be a great place to work.

Work begins on new operating theatres at Poole Hospital

Work has begun to create two new operating theatres at Poole Hospital. This is part of our wider transformation programme, which will see Poole become the UK's largest major planned care centre.

The project involves internal demolition and refurbishment works and will continue into next year, with the next phase beginning in April 2027.

As work progresses, you may notice increased construction activity around the site, including deliveries, scaffolding and some temporary changes to parking and access.

Further updates will be shared as the project progresses.

We're on the move!

A large number of office moves are starting at the beginning of August. This includes:

- teams moving from the Education Centre at RBH to Tringham House opposite our BEACH Building - including our execs and care group teams
- a number of admin and booking teams from across our sites moving into Tringham House
- teams moving from the Stour and Avon buildings into the Education Centre
- teams moving into the Eye Unit, including our Housekeeping teams
- Research teams moving into the Avon Building

Our main Healthset Electronic Health Record Team will also be based on the ground floor of Tringham House.

Find out who will be based where: You can see a full list of all the moves here.

Dorset Endoscopy Diagnostic Hub opening in late September

The opening of the Dorset Endoscopy Diagnostic Hub has been delayed until September 2026 following a review of the latest construction and operational readiness programme.

The revised opening date will allow completion of the final commissioning, validation and service readiness activities required before patients can be seen in the new facility.

Although the opening has been pushed back, once operational, the new £21m hub will provide a state-of-the-art outpatient facility to support planned care and forms a key part of Dorset ICS's long-term vision for the Community Diagnostic Centres Programme.

The hub will enable us to treat more patients, reduce waiting times, enhance patient experience and train the next generation of endoscopy professionals in Dorset.

The September opening date remains subject to:

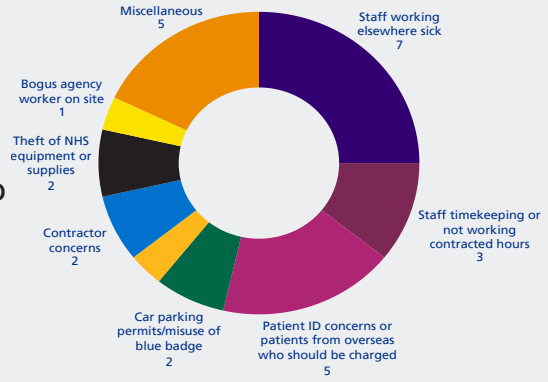
- Agreement of the inpatient/ ERCP pathway.
- Completion of final commissioning, validation and operational readiness activities.

We will continue to share updates as we move towards opening.

Protecting NHS funds

UHD Counter Fraud | 2025-2026

28 Referrals to **Counter Fraud Specialist**



1 successful prosecution for fraud

1 case charged by the **Crown Prosecution Service** for fraud

1 further case with the **Crown Prosecution Service** for a charging decision

1 case with **Dorset Police**

2 referrals made to the **General Medical Council**

£256k fraud losses recovered

3 disciplinary sanctions and more under consideration

In collaboration with: tiaa

Use every NHS pound wisely

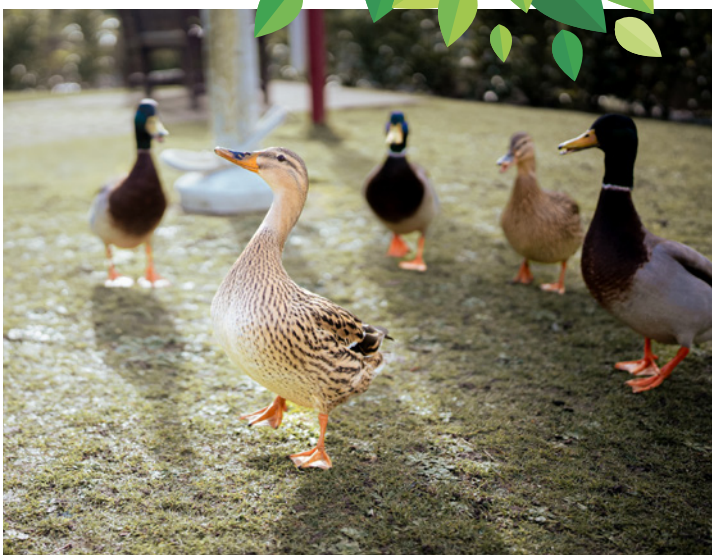
The latest Counter Fraud figures for 2025-2026 highlight the important work being carried out by our teams and Counter Fraud specialists to identify, investigate and take action against fraud.

Pete Papworth, our Chief Finance Officer, said:
"These figures demonstrate our continued commitment to protecting public funds and ensuring that every NHS pound is used wisely for patient care. I am proud of the vigilance shown by our teams and the strong partnership with our counter fraud specialists, which has enabled us to recover significant losses and take firm action where wrongdoing has occurred."

Fraud affects resources that could otherwise support patient care, so every member of staff has an important role in helping to prevent it. If something does not look right, please speak up and report concerns.

Together, we can help protect NHS resources and ensure they continue to benefit the patients and communities we serve.

Great strides on sustainability



We're making good progress on our sustainability journey, with teams across the Trust helping to reduce our environmental impact and prepare for the future.

Over the past year, improvements to our buildings, equipment and energy systems have helped us reduce energy use and cut carbon emissions by 1,200 tonnes. We've also continued to increase our use of solar energy as part of our commitment to greener healthcare.

We're now looking ahead to the next Green Plan, with work underway to understand the challenges posed by climate change and explore new ways to reduce carbon emissions. This includes working with the Carbon and Energy Fund to look at lower-carbon heating options for our main hospital sites, including innovative solutions such as geothermal energy.

Thank you to everyone across the Trust who is helping to make a difference through our sustainability work.

National Job Evaluation Review - Nursing and Midwifery

The Government has confirmed a national review of all nursing and midwifery roles in England, commencing with Band 5 roles. This follows the publication of updated national nursing job profiles by the NHS Staff Council in 2025 and is intended to ensure roles are accurately described and fairly evaluated.

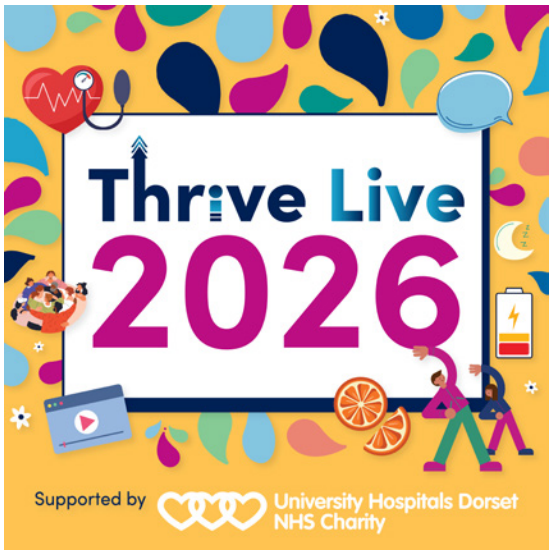
The initial Band 5 review does not represent a change to roles and is not an automatic progression to Band 6. The focus is on confirming that current job descriptions appropriately reflect the work that is already being undertaken in practice.

To find out more about what we are doing here at UHD, follow this link.

Save the date for Thrive Live 2026

This September, Thrive Live will be back and bigger than before! We have expanded your UHD health and wellbeing fair to three weeks from **14 September** to **2 October**. There will be events across sites and online focusing on supporting your health and wellbeing.

You can still catch up on last year's event for a taster of what to expect this Autumn. More details coming next month.



We each have
a voice that counts

We are compassionate and inclusive
We are recognised and rewarded
We are safe and healthy
We are always learning
We work flexibly
We are a team

Summer NHS People Pulse

- Have your say before Friday 31 July

Please visit **www.nhspeoplepulse.com** to tell us about your experience of working at UHD.

The results form our seasonal feedback cycle, helping us celebrate things that we do well, and identifying areas for improvement.

This month we want to hear your feedback on speaking up at UHD.

Please share the pulse with your colleagues who don't access their emails by printing these posters and displaying them in your area.

Visit our intranet page for more information and resources.

Thank you for taking the time to share your feedback with us.

Information for managers

Please give your teams protected time to complete the survey. We have created resources to help you encourage your teams to take part, including a guide, posters, and slides to share in your team meeting.

Thank you for your support to promote the survey.

Lead our Staff Network with Pride

We are seeking a passionate and motivated individual to join our Pride Staff Network as a Network Co-Lead.

This is an exciting opportunity to help shape a more inclusive and compassionate workplace, supporting UHD's People Promise by creating a strong, unified staff voice.

For more detail about this role, click here.

Each of our UHD networks has been given 15 hours of protected time per month to focus on the role and make a real difference.

Why apply?

- Develop valuable leadership and professional skills
- Gain a platform to influence change and represent colleagues
- Make a meaningful impact on inclusion across UHD

For more information about the UHD Pride Network, visit the Staff Networks pages on the intranet.

If you're interested in this role, or have any questions, please contact **bridie.moore@nhs.net**.

Deadline for applications is 14 August.

You will need to **liaise with your manager** to ensure they support you in stepping up in your role as a Staff Network Lead.

NHS UHD Pride Network

UHD Charity update

University Hospitals Dorset NHS Charity
Registered Charity No.1057366

Our UHD Charity is here for you

As your hospitals' charity, we are here to fund the extras that enhance patient and staff experience. Whether it's funding state-of-the-art equipment or investing in staff development through conferences and wellbeing support, your Charity is here for you.

You can learn more about how to apply for charity funding here.

If you are interested in finding out more about how you can support the charity:

Follow **@UHDCharity** on:
Facebook Instagram and X (Twitter)
Visit **UHDcharity.org**,
or contact the office on **0300 019 4060/8449**

Our charity has funded this brand new state-of-the-art equipment for our physiotherapists and their patients.

Let's talk about IT

Data Quality Tip of the month - Is the responsible consultant correct for inpatients?

A responsible consultant is essential for inpatient care, providing clear clinical accountability and overseeing the patient's hospital journey. They coordinate multidisciplinary input, support safe and consistent decision-making, act as a key point of communication for patients and families, and help ensure timely and effective discharge planning. Keeping this information accurate also supports patient safety by ensuring risks and complications are managed by the appropriate senior clinician.

It is therefore important that the responsible consultant recorded in eCaMIS is kept up to date. If you manage inpatients and notice that the consultant details are incorrect, please update them as soon as possible.

If you are unsure how to make this change, or do not have the necessary permissions, a short eLearning course is available here: eCaMIS Inpatient - Update Responsible Inpatient Consultant

Ensure all results are signed off (filed) in ICE

The ICE system is the primary method for electronic requesting and reporting across Haematology, Biochemistry, Immunology, and Microbiology.

All results must be reviewed and signed off (filed) within ICE. Compliance with this requirement is monitored and reported as a key metric on the Patient First Scorecard.

Training and videos are available on the IT Training Portal