betterhealth

THE ANNUAL REPORT OF PORTSMOUTH HEALTHCARE NHS TRUST 1998/1999



- performance
- people
- pounds
- partnerships



foreword

The year to April 1999 saw the NHS celebrate its 50th anniversary. This provided us with an opportunity to look back at where we had come from and a chance to acknowledge our many successes and achievements.

Progress locally has been substantial: the closure of two long stay institutions, the development of radically improved approaches to community care, the introduction of new, more effective, therapies and other improvements too numerous to mention. It is a pace of **change and improvement** which continues to this day and which the pages of this annual report describe in fuller detail.

The anniversary also helped us to recognise that the success of the NHS has been due, in the main, to the expertise, commitment and energy of its workforce. The NHS has been able to adapt and improve because the people who work for it have been capable of meeting the challenges of change. The pages of this report also provide evidence of the **innovative and pioneering** as well as the equally important **routine and reliable**.

However, success comes at a price. There is a continuing need for the NHS to invest in better buildings and facilities. Without them, it cannot take advantage of modern approaches to care or exploit their benefits. Much has been done during the last twelve months to secure a **healthy and modern** environment but more is needed. It is a matter of some concern to me that we have not yet been able to secure funding under the PFI initiative for badly-needed replacement building schemes, especially in mental health.

Finally, this report gives me an opportunity to say **thank you** to our staff and to our many partners in health and to carers, families and volunteers. It will be crucial to continue the work we have pursued over the last twelve months to **support** them and involve them in the decision-making process. Without them, we would, quite simply, be unable to provide the modern health service of which we are rightly very proud.

headlines in health

- The Trust met or exceeded its activity targets, providing consultant treatment for 12,000 people, day care for 35,000 people, outpatient treatment for 26,000 people and making nearly 1.5 million community visits.
- Long waiting times were tackled. Most services achieved targets for outpatient waiting times.
 Over 98% of patients are seen within 30 minutes of their appointment time.
- Over £100 million was invested in improved health, an increase of nearly 5% on the previous year. Around £4 million was spent on new and improved buildings and major items of equipment. Overall, the Trust managed its finances to budget.
- More nurses and specialist staff were appointed, an increase equivalent to 75 full time employees.
- Staff retention figures have improved for the fifth year running and the turnover rate is just 12%.
 For nursing staff, the figure has been reduced to 8.5%.

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Margaret Scott Chairman

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Margaret Scott, Chairman (second left) with some of this year's Trust award winners: John Grunstein, Margaret Quinnell, Jan Keeley and Grace Harding.

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the care we provide

Portsmouth HealthCare Trust was established in April 1994. It provides a range of specialist and community-based health services for the people of Portsmouth, Fareham, Gosport, Havant, Petersfield and the surrounding areas. These include:

Mental health services

- inpatient assessment and treatment
- specialist support in the community

Alcohol and drug services

for people at risk from or dependent on these and other substances

Child health services

- special needs
- community services
- surveillance and screening
- immunisation and vaccination
- school health
- child and family therapy

Palliative care

supporting people who are terminally ill and their carers

Services for elderly people

- acute inpatient and outpatient services for people with either physical or mental illness
- care for people at home
- NHS continuing care

Community services

- dental
- family planning
- podiatry (foot care)
- physiotherapy
- speech therapy
- occupational therapy
- psychology
- home equipment loans
- district nursing
- health visiting
- community hospitals

Learning disability

- specialist health assessment and support
- residential care

Health promotion

advice and information

HIV/Aids

advice and information

what we wanted to do during the year

The Trust aims to provide 'effective health care for local people.' It is guided by four organisational values:

performance matters innovation and striving for excellence in everything that we do is essential;

people matter every person, whether patient, client, employee, carer or relative, is valued;

pounds matter every pound has to be earned and spent wisely; and

partnerships matter working well with others and recognising our interdependence is crucial.

During 1998/99, the Trust worked towards a number of key aims:

performance

- respond to pressures on services
- meet its service agreements and workload demands
- maintain the quality of services

people

- extend staff development and training initiatives
- equip the Trust and its staff to meet the demands being placed on it
- reprovide long stay hospitals

pounds

- improve value for money
- reshape services to better meet demands

partnerships

- support Portsmouth Hospitals Trust in improving acute services
- strengthen relationships with other health and social care organisations



Grace Harding, a nurse, checking medicines at Petersfield Hospital.



Dr. John Rand consults with staff nurse Bridget Spencer at Gosport war memorial Hospital.



Christine Woodman prepares a bed on Rowan Ward, Petersfield Hospital.

better services and better health

performance matters

Once more, the Trust met or exceeded the activity targets set for it by Portsmouth and South East Hampshire Health Authority. In a year of continued high demand and further pressure on finances, this is a substantial achievement.

- our consultants helped nearly 12,000 people through their course of treatment (FCEs) that's 1,000 every month;
- we provided day care for the equivalent of 35,000 people;
- we made over 4,000 visits every day to patients at home or in the community; and
- we saw 100 more outpatients each week than last year.

Summary of activity 1998/99

	Target	Variance	Actual	
Finished consultant episodes (FCEs)	11,678	+3.34%	12,068	
Day care attendances	35,348	-1.47%	34,830	
Outpatient attendances	24,924	+3.43%	25,779	
Face to face contacts in the community	1,300,354	+7.8%	1,402,751	

'innovation and striving for excellence in everything we do is essential'

a year to remember

Adult mental health

- Demands increased and the pressure on services remained.
- A new GP counselling service was developed and an 'out of hours' service was introduced.
- Extra staff were appointed to support people who require frequent admission and residential services were strengthened, providing improved access to treatment.
- 'Skillploy' was transferred to Shaw Trust and Winchester Alliance successfully and now offers an enhanced range of services.
- Unacceptably poor environments for acute care (especially in Solent and King Villa units) remain a major concern.

Children's services

- There have been increasing demands on health visitors as a result of other agencies tightening their referral criteria and funds have been subject to close scrutiny.
- An autism assessment service was started and community clinics for child protection were set up.
- More nursery nurses were appointed to support health visitors.
- Health visitors based in A&E departments now provide telephone advice to parents, providing a link between the department and GP practices.

Community dental services

- The demand for 'safety net' services is increasing and some parts of the area do not yet have good access to a general dental practitioner.
- Two dental sedationists now provide services at the Poswillo Dental Centre.

Community hospitals

- The 'GOSDOC' scheme was extended. Here, GPs use Gosport War Memorial Hospital at evenings and weekends as part of an on-call service.
- Staff received specific training in minor injuries and a good practice forum was launched to share ideas.
- Additional outpatient clinics were provided in collaboration with Portsmouth Hospitals.

District nursing

- The number of clients receiving continence supplies continues to rise. There has also been an
 increase in demands for night nursing services, particularly for patients with more complex needs.
- The 'district nurse as care manager' scheme was extended and the new specialist/resource nurses initiative was launched successfully.
- A quality forum was established. This shares good nursing practice, reviews complaints, looks at patient/client feedback and reviews risk issues for staff.

Jake Pedcover practises co-ordination skills at the Child Development Centre in Portsmouth.





Carol Lavery chats to Phyliss Gotobed on Anne Ward, Queen Alexandra Hospital.

Elderly medicine

- Nursing and medical staff shortages remain. Consultants faced increased demand for their time following the successful implementation of a fractured neck of femur service.
- The Trust's stroke service recorded high scores in the National Sentinel Stroke Audit.
- A number of initiatives to ease the pressures of the winter months were taken. These included: a discharge lounge, extra nursing cover, and better rehabilitation services.

Elderly mental health

- Although there has been some modernisation in recent years, many premises are in need of improvement. Helping to meet the problems this causes contributes to the pressures felt by staff and budgets.
- A development bid for introducing the drug Aricept was accepted by the Health Authority and dedicated clinics have now been established.
- Beaton and Fernhurst wards at St James' Hospital were upgraded.

Family planning and reproductive health

- Pressures on a number of services were experienced. Psychosexual services and drug, contraceptive and staff costs were monitored closely.
- The Ella Gordon Unit was transferred to new premises on the west wing of St Mary's Hospital.
- A telephone help line now gives clients direct access to a specialist nurse.

HIV/Aids

- HIV/Aids and HIV/mental health clinical nurse specialists continued to provide valuable specialist advice to patients, families and staff.
- A number of initiatives were developed or strengthened including: gay men's health promotion service, sex sense, young people's substance misuse service, post-coital contraceptive service, dual diagnosis service and 'Talking about...sex' newspaper for young people.

Learning disabilities

- Demands for services increased, bringing intense pressure on staff and budgets.
- Sarisbury bungalows were improved and community teams were strengthened.
- Plans were drawn up for a specialist service for people with epilepsy and the problem of
 providing services locally for people with mental health problems and learning disabilities was
 examined.

Occupational therapy

- Demand is increasing, particularly for equipment to support discharge from hospital, and from the terminally ill and those seeking greater independence in the community.
- The introduction of a peripatetic service within the city area has been successful and will be extended.
- An annual training programme to provide staff with specialist skills was supported by the School
 of Occupational Therapy and Physiotherapy at Southampton University.

Palliative care

- Demands on services have added to pressures on home care and hospital nurses.
- Funding was provided for additional medical and nursing staff.
- Links between Portsmouth Hospitals' cancer services, The Rowans, MacMillan nurses, Countess Mountbatten House and other palliative care providers were strengthened.

Physical disability

- Work was done to develop services across agencies and geographical boundaries to ensure the best possible care from diagnosis through to rehabilitation and independence.
- Improvements to access standards were made and have now been built into all new building developments and upgrades.

Physiotherapy

- The recruitment of junior staff was completed successfully and a charter mark was awarded to the 'neuro-gym' at Queen Alexandra Hospital.
- Guidelines were developed for stroke and acquired brain injury patients and comprehensive staff training programmes were completed.

Podiatry

- Services were started at two new community sites enabling one mobile unit to be decommissioned.
- A fast track service, particularly for those needing ultrasound and other therapy for acute problems, helped speed up discharge and treatment times.
- Senior clinical staff were appointed to help lead developments in biomechanics, paediatrics and gait, diabetes, health promotion and research, rheumatology and surgery.

Psychology (Clinical)

- Relationships between psychology, primary care counselling and psychotherapy services were strengthened.
- Significant progress was made in improving support for mental health, child and family therapy, physical and neurological disability, acquired brain injury and palliative care services.
- A District Head of Psychology was appointed.



Support worker Maureen Bache, with Amy McAuliffe, on Sultan Ward, Gosport War Memorial Hospital.

Jacqueline Dewar, a nurse at Victoria Cottage Hospital, Emsworth, helps Emily Lewis out of the new lift.



Speech and language therapy

- Pressures on services are increasing.
- Better ways were introduced of meeting the needs of people waiting a long time for services and support.
- Improvements were made to the communication aids loan system and better health promotion support was offered.

Substance misuse

- Kingsway House (Southsea) and Avalon (Fareham) resource centres were opened fully.
- Links with GPs were strengthened to help them identify and work with potential substance misusers more effectively.
- A 'dual diagnosis' pilot scheme was established, providing better links between substance misuse and adult mental health services.

Ann Egerton (left) provides dental treatment to Stephen Evans with help from Tracy Piper at Petersfield Hospital.

developing better quality services

Introducing the new national initiative on 'clinical governance' was a key priority for the year. The Trust has begun the process of measuring services not just against finance and activity targets but also clinical targets such as quality, outcomes and the patient's experience. It has also sought to provide those in the front line of care with better treatment information and up to date clinical guidelines.

A range of other work to improve the quality of care was completed.

- a clinical nurse development programme was introduced;
- 26 clinical audits were completed, and many more were started;
- a review of the psychology service was undertaken;
- surveys of patients and clients were carried out;
- a podiatry clinic for homeless people was set up;
- practice facilitator roles were created in the department of medicine for elderly people, for tissue viability, nutrition and incontinence;
- a major refurbishment of Sarisbury bungalows (learning disabilities) was completed; and
- the family planning service's 'Ella Gordon Unit' was moved to new premises at St Mary's hospital.

The Trust has concentrated on helping clinical staff, and those supporting them, understand the changes which are needed, such as bringing together clinical risk assessments, clinical audit projects, risk event reports and complaints, and actively using this information to improve services.

'Thank you' letters

During the year, over 3,500 expressions of thanks were received from patients and relatives.

Complaints

The Trust works hard to resolve complaints as soon as it can. During the year, **97 complaints were received**. Most were resolved locally. Over 90% were acknowledged within two working days and almost half of all complaints were responded to in full within four weeks. Although the number of complaints is reducing each year, they are becoming more complex.

When it can, the Trust learns from its mistakes and a number of improvements to services have resulted from complaints. The system for transferring patients between mental health consultants was revised, a working party was established to review the number of falls in elderly mental health wards and an information leaflet on MRSA was developed.

Independent Review

Five requests were received for an independent review of the action taken by the Trust. Two panel hearings took place, two cases were 'sent back' to the Trust for further action locally and in one case no further work was necessary.

Delays in appointing lay chairs and clinical advisers meant that it wasn't possible to reach decisions about whether to proceed to independent review within 20 days. When a decision to go ahead has been taken, the reviews should be concluded within 6 months. However, in both cases, delays from complainants and difficulties in finding clinical assessors and suitable hearing dates, meant this was unachievable.



Staff nurse Lynne Gough in the minor ops department at Gosport War Memorial Hospital. BETTER HEALTH

Research and Development

Priority has been given to research which is concerned with the effectiveness of the organisation and delivery of care. However, the Trust also supports individuals who have secured funding from outside sources.

During the year, the Trust supported research projects into eschemic heart disease (in collaboration with Portsmouth Hospitals Trust), the factors influencing delay and admission of stroke patients to hospital, 'parenting', speech and language therapy, leg lifting devices, oral contraceptives and weight gain.

Dr Sarah Randall, consultant in reproductive health, secured Department of Health funding as one of two national pilot site studies looking at the effectiveness of a proposed screening programme for chlamydia.

The Trust is a member of the Portsmouth Research and Development Consortium.

Clinical governance

The Government's 'Clinical Governance' programme aims to make NHS organisations accountable for continuously improving the quality of services and for safeguarding high standards of care.

The Trust has appointed Ian Reid, its Medical Director, as the senior clinician responsible for Clinical Governance arrangements and a sub committee of the board has been established to oversee quality issues and clinical care.

It will develop a baseline assessment of the quality of clinical services, along with a development plan to address deficiencies, by the end of September 1999. It will also be working across organisational boundaries, collaborating with Portsmouth Hospitals Trust and the four local primary care groups in the area.

Excellence in nursing

Work was completed during the year on establishing a new clinical nursing development programme. This aims to improve the quality of nursing by identifying those practices likely to contribute most to effective care and equitable access to services. The programme will concentrate on three main areas: clinical supervision, the use of research evidence and the development of clinical leaders.

Waiting times and patient's charter standards

Waiting for outpatient appointments. National and local quality standards dictate that nine out of ten people needing an appointment should be seen within 13 weeks. Most services within the Trust continue to achieve this target. Everyone should be seen within 26 weeks. All departments met this standard except the child and family therapy service. Here, staff continue to be under intense pressure. Waiting times, however, are being steadily reduced.

Waiting in the outpatients' departments. Here, the Trust's performance remains consistently high: over 98% of patients were seen within 30 minutes of their appointment time.

Clare Hancock, a district nurse in Havant.



Single sex accommodation

Most areas comply with the patient charter standards but a number do not. However, major structural changes will need to be made to these buildings before the standard can be adhered to fully. The Trust will assess what work will need to be done during 1999. Achieving the standards in Solent and King Villa units at St James' Hospital depends upon securing PFI funding and, in George and Elizabeth wards at Queen Alexandra Hospital, on finding a way of reproviding Trust services.

Risk management

The Trust has a risk management strategy which is updated annually and a number of key objectives were delivered during the year. A new computer system for recording potentially harmful events and unanticipated problems was introduced. This will allow the Trust to analyse all reported risks and to identify those most commonly occurring to patients and staff. Action can then be taken to minimise or prevent harm.

Cardio-pulmonary resuscitation (CPR) training

A new training contract was established with Portsmouth Hospitals Trust to ensure that Portsmouth HealthCare staff receive the most up to date training on CPR.

Safety and security

A two year project to improve personal safety and security for staff and patients was launched. Front line staff and service managers have been involved in driving the project and a survey was carried out to find out where staff felt most at risk.

A personal safety training package for staff has been developed and leaflets and posters, explaining the Trust's approach to managing violence, were placed on display in all Trust premises. Strong links have also been established with local authorities and police services.

Year 2000

The Trust has undertaken significant preparatory work to ensure that any problems which are encountered as a result of the Year 2000 date change are minimised.

Work has been led by a Project Group - including a seconded Y2K Project Manager and Assistants, the Trust's Operational Director, Head of IM & T, Estates Manager, Service General Manager (Fareham & Gosport), Communications Manager, Risk Adviser, Staff Representative, Internal Auditor and the Divisional NHS Supplies Manager. They have met regularly throughout the year and reported on progress to a Project Board (The Trust's Executive Director Group) and the full Trust board.

Preparations include checking all IT, estates and medical equipment, completing remedial work on non-compliant date sensitive items: liaison with contractors and suppliers to obtain assurances on their Year 2000 state of readiness and guarantees of service continuity; involvement of staff through the joint consultative arrangements and regular internal briefing; review of the Trust's Major Incident Plan and preparation of detailed continuity and contingency plans for all services and critical equipment items.

Preparatory work has been monitored over the last year and the Trust is confident that it will be Year 2000 ready by the end of September 1999 in line with HSC 1999/188 (The Year 2000 Problem: The 30th September 1999 deadline) and that it has taken all reasonable steps to minimise risks and maintain service continuity through the Year 2000 date change.



Debbie Carpenter,

preparing medical records





Oral health promotion adviser Tracy Strouger at work in a local school.

BETTER HEALTH

performance matters

The Trust's neurology gym at Queen Alexandra Hospital has been awarded a prestigious Charter Mark. Holders have to demonstrate that they give outstanding service, putting the user first, and that they are always looking to improve. Clear choices, consultation and courtesy to users must also be apparent.

The birth of a child is, for many people, one of life's richest experiences. But it is also one fraught with danger.

In March 1998, Louise Pilgrim was left paralysed from the waist down following a complication in pregnancy.

A year later, thanks to her efforts and those of staff at the neurology gym, she was back on her feet, coping with the demands of her healthy and happy baby Katie.

Sue Roberts leads the neurology gym team. Building on the specialist therapy provided by Odstock Hospital in Salisbury, she and her colleagues developed a series of exercises, for home and at hospital, which helped Louise walk again.

Louise was full of praise for staff. "They've been excellent," she said.

"It's slow progress but my balance is much better and I can do so much more more at home with Katie."

Neurogym patient Louise Pilgrim and daughter Katie, with Chris Bull (standing) and Maria Rowsell, members of the physiotherapy team at Queen Alexandra Hospital.

people matter

'every person,

whether patient,

client, employee, carer

or relative is valued'

Without the skills of its clinical and support staff, the Trust would not be able to provide the range and quality of the services its offers. It remains one of the largest organisations in the Portsmouth and south east Hampshire area, employing, at the end of March, 3,263 people (whole time equivalents). Around two-thirds of the workforce is nursing staff. The number of staff increased during the year, mainly due to the appointment of 32 more qualified nurses.

Staff in post March 1999

Staff group	Whole time equivalent	
Nurses (qualified and health care support workers)	2,172.50	
Professions allied to medicine	203.00	
Technical and scientific	121.31	
Managers, admin and ancillary	652.03	
Doctors and dentists	114.87	
Total	3.263.71	

Supporting staff

Positive employment practices and good professional experiences for employees of the Trust help to maintain high standards of quality and care for patients and clients. Employees are encouraged to express their views and to contribute to the decision making within the Trust.

Disabled employees

The Trust continues to implement and work to the standards set by the Disability Discrimination Act. This includes the provision of training and the raising of awareness for managers and staff to promote the case of disabled people in the workplace.

In the last year, a Diversity Matters Group was established. This works to bring together all the equal opportunities activities within the Trust and those associated with people of differing abilities, some of whom are represented on this Group.

Practical programmes to help reduce stress and combat the effects of heavy and continuous manual handling continue. These include the 'Fast Track' backcare scheme, stress reduction programmes and training in manual handling.



Catering assistant Val Bergman at Gosport War Memorial Hospital.

BETTER HEALTH

Policy development

The Trust works hard to build the views of employees into its policies by involving staff and their representatives. Staff have contributed to the development of a Whistleblowing Policy, Domestic Abuse Policy and a Staff Charter. This, in turn, has provided opportunities to work regularly in partnership with recognised staff organisations including the Royal College of Nursing, the Manufacturing and Science & Finance Union and UNISON. Collaboration with these and other staff organisations is also helping the Trust to prepare for the millennium period and for the pressures of winter.

Recruitment and retention

Retention figures have improved for the fifth year running and the staff turnover rate is just 12%. For nursing staff, the figure has been reduced to 8.5%.

Special efforts have been made by the Trust to recruit nurses in the face of a national shortage of staff in all health care professions. The 'Pathways to Prosperity' scheme helps staff to become a qualified nurse via a sponsored training course at Southampton. The scheme also provides NVQ training for health care support workers and special 'return to learn' programmes have been developed in conjunction with UNISON.

In the autumn of 1999, around 20 staff from the Trust will enter nurse training at Southampton University. Twelve GNVQ students at Highbury Technical College will also be sponsored by the Trust. These schemes will help the Trust to secure a supply of qualified nurses in the future and offer better career development for the individuals concerned.

Staff involvement

The Trust and the staff representatives continue to work together to secure opportunities for staff involvement. Some of the initiatives and ideas developed by Trust have been cited as good practice in the new NHS task force report on staff involvement.

Education and training

The Trust continues to work in partnership with the Universities of Southampton and Portsmouth to provide a range of programmes for clinical and support staff, many of which are provided in the work place.

Two further areas within the Trust, Adult Mental Health and Trust Central Office services, have achieved the 'Investor in People Award'. A specific programme of clinical nurse development was implemented and a programme for doctors in management was continued.

Communications with staff

The quarterly newspaper 'HealthCare First' has been firmly established as a popular quarterly medium for providing information to staff. This, together with the weekly 'Communicate', also provides opportunities for staff to share ideas and successes in addition to the routine information that is the lifeblood of the organisation. A monthly system of Information Exchange is operated where groups can meet face-to-face with their manager and share information relevant to the organisation. Teams and departments are also encouraged to have 'away days' in order to develop patient services within their area of responsibility. This helps ensure their maximum contribution to the solving of problems and the development of good ideas.



Physiotherapists Heather Montgomery (standing) and Becky Lane, at Queen Alexandra Hospital.

the work of the trust board

The Trust board consists of a chairman, five executive directors (or the trust's most senior employees) and five non-executive directors.

Non-Executive Team

Margaret Scott (Chairman). A former technical manager with IBM and an experienced NHS board member. She lives in Petersfield

Sandra Jones (Vice-Chairman). A former senior personnel manager and a vice-chair of Leonard Cheshire Care at Home Service. She lives in Southsea.

Graham Heaney A lecturer and researcher with the Southampton Institute of Higher Education. He is a Portsmouth City councillor and lives in Portsmouth.

David Lee Former company secretary of Zurich Insurance Group, he lives in Locks Heath. Anne Monk A former management consultant and a governor of Chichester Tertiary College. She lives in Southsea.

Andrew Silvester A union official, he works at the MOD at Fleetlands in Gosport. He is a Portsmouth city councillor and lives in Drayton, Portsmouth.

Executive directors Max Millett (Chief Executive) Ian Reid (Medical Director) Eileen Thomas (Nursing Director) Ian Piper (Finance Director) Tony Horne (Operational Director) Peter King (Personnel Director and co-opted member of the board)

Panel members

Mental Health Act Panel Margaret Scott Charles Shawcross Anne Monk (Chairman) Alistair Macnaughton Pat Ridge (Secretary) Remuneration & Terms of Service Panel Sandra Jones (Chairman) lan Piper Peter King Neil Stubbs Nicky Pendleton Margaret Scott Andrew Silvester Rebecca Kopecek (Secretary) BETTER HEALTH

Business Case Approval Panel Tony Horne (Chairman) David Lee Margaret Scott Ian Piper Janet Kearney (Secretary) Financial Audit Panel Graham Heaney Tony Horne David Lee Anne Monk (Chairman) Ian Piper Margaret Scott Andy Wood (Secretary)

Finance and Performance Panel Tony Horne David Lee (Chairman) Sharon Merrikin Ian Piper Margaret Scott Andy Wood (Secretary)

Members' Interests

David Lee: Trustee of the Zurich Insurance Company's United Kingdom Pension Fund.



Health Minister John Denham reviews the NHS taskforce Report on Staff Involvement, (launched at this year's staff conference) with Joan Stocker (left), Andy Harman and Fran Fox.

people matter

The people who work for the Trust are able to play a part in making decisions about the future management of services. The Trust's staff conferences are now acknowledged nationally as good practice.

Wider consultation, improved communications and a greater emphasis on training and development were identified by the staff conference as vital to the success of plans for further change in the NHS.

Staff asked to be informed honestly and openly about the reasons for change and work was started on a staff charter.

Staff workloads are frequently examined to help ensure that the right people with the right skills are doing the right jobs and that stress in the workplace is kept to a minimum.

The sponsorship of NVQ courses was extended and more opportunity was provided for staff to develop skills through research. Recruitment and retention packages were also examined to develop, where possible, family friendly employment policies.

investing in services

pounds matter

The Trust is a large and complex organisation and, in terms of expenditure, is one of the largest in the Portsmouth area. Managing its finances effectively is a vital task. Last year it complied with all of its financial duties, staying within budget and meeting its financial targets.

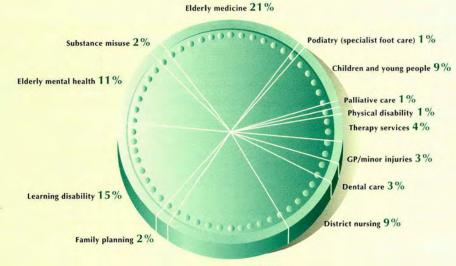
The Trust invested nearly £100 million in local health services during 1998/99, an increase of 4.7% on the previous year. This is the equivalent of over £10,000, every hour of every day, 365 days a year.

Most money, around two-thirds, went towards meeting staff costs but maintaining buildings and securing services from other providers of care were also important items of expenditure.

The majority of funds were provided by local health authorities, with Portsmouth and South East Hampshire Health Authority being the largest single source of money. However, money was also received from other NHS trusts.

(see tables 3 and 4 in the financial pages of this report).

'every pound has to be earned and spent wisely'



Where the money goes

Adult mental health 18%

The Trust's management costs are low and represent just 4.9% of expenditure. They rose only marginally last year, despite the extra pressures on services and the changes needed under new legislation.

investing in places

Nearly £4 million was invested in the buildings and equipment used by the Trust. More than £2.2 million was spent on improving St. James' Hospital, St. Christopher's Hospital and other services in the Fareham area. Over £1.5 million was also spent on a number of other capital schemes, such as improvements to buildings and major items of equipment:

•	Health Centre Improvements	£770,000
•	Disabled Access	£31.000
•	Replacement Generators	£82,000
•	Vehicles	£104,000
•	Learning Disability Community Homes	£263,000
•	Small Hospitals Improvements	£99,000
•	Information Technology	£161,000
•	Equipment	£40,000

Private Finance Initiative

Some accommodation for adults with mental health problems and people with learning disabilities is in urgent need of replacement. Plans for five schemes offering replacement facilities have been drawn up but approval under the Private Finance Initiative has been subject to continued delay. This means that clients and staff continue to live and work in unacceptably poor conditions.

Scheme	Location	Patient/client group
30-bed acute unit	Portsmouth	Adult mental health
14-bed rehabilitation unit	Portsmouth	Adult mental health
30-bed acute unit	Havant	Adult mental health
14-bed rehabilitation unit	Havant	Adult mental health
three 5-bed bungalows	Fareham	Learning disability

the all the p

Porters Alex Chapman (left) and Paul Young assist with the successful recycling project at St. James' Hospital.



pounds matter

A war on waste at St James' Hospital has cut down the cost of disposing of rubbish and, at the same time, has helped to care for the environment.

The 'Be Seen To Be Green' campaign led to a substantial reduction in the amount of waste which needed to be sent to landfill sites.

During the year, staff at the hospital recycled 8 tonnes of waste paper, 550 cubic metres of cardboard, 140 cubic metres of scrap metal, 600 litres of used cooking oil and 208 cubic metres of mixed recyclable waste.

Local authority landfill sites needed less space to dispose of the hospital's rubbish. Over the year, the saving was the equivalent of three average-sized semi-detached houses.

Making pounds count by being green is a team affair. Cardboard is collected by portering staff, staff on the wards and in offices using special facilities to recycle plastic and paper and waste oil and scrap equipment is rescued by kitchen staff.

The scheme proved so successful that it was extended to cover other community hospitals within the Trust.

partnerships matter

partnerships matter

The Trust has worked hard to develop productive and effective working relationships with all those who have an interest in its services, whether they be the health authority, colleague trusts, social services, primary care staff, patients, families or carers.

It has collaborated closely with Portsmouth and South East Hampshire Health Authority to look at ways of meeting pressures on services. It has also supported the development of primary care groups.

The success of the 'caring in winter' programme was due to this commitment to partnership. The Trust worked with Portsmouth Hospitals Trust, local GPs and social services to secure the earliest and most rapid treatment and care for those patients needing urgent treatment during the busy winter months. This freed up beds for use by others and helped people to return home with the right support more quickly.

The Trust collaborates with the Universities of Portsmouth and Southampton to provide modern and high quality training programmes for its staff and to supply research and academic support for its audit and clinical development programmes.

The development of good health services requires effective working across organisational boundaries. The Trust worked to support Portsmouth Hospitals' bid for a new £75 million hospital scheme under the private finance initiative and to prepare for the transfer and modernisation of services for elderly people envisaged under the scheme.

The involvement of users and carers in the planning and delivery of services is well established. Developments in 'reflective practice' helped to stimulate closer partnerships with patient groups and a new format for the Trust's annual public meeting allows participants to become better informed about NHS decisions.

'working well with others and recognising our interdependence is crucial'

> Members of the League of Friends at Queen Alexandra Hospital: Sheila Day (left), Kathleen Rowntree and Tony Brereton.

fifty years of the NHS

The NHS celebrated its 50th anniversary during 1998, providing an opportunity to celebrate its achievements and to acknowledge the efforts of those who have helped make it, arguably, the country's most successful and best-loved public institution.

The staff newspaper, HealthCare First, produced a special eight-page pullout which charted the progress of the NHS locally in providing modern, well-equipped and comprehensive services for local people.

A painting competition was organised with local schools and the winning picture, of a busy patient waiting area, was displayed within the Trust.

An exhibition illustrating the changing work of and demands on services at St James' and Petersfield hospitals was also mounted.

Staff held a series of events to commemorate the anniversary, involving fancy dress and even the sampling of 1948-style restaurant menus.

Work was also done to help our partners celebrate other important anniversaries occurring during the year including the 75th anniversary of the opening of Gosport War Memorial Hospital.

And, a small tea party was organised for the Trust's own 'children of the NHS' - members of staff who were celebrating their 50th birthday during the anniversary year.

partnerships matter

At the beginning of the year, the National Association of Leagues of Hospital and Community Friends celebrated its 50th anniversary.

The Leagues play a crucial part in supporting staff, patients and clients and provide people with a wide range of amenities, help and even some of the simple pleasures of life.

Leagues attached to the Trust offer a wide variety of services, including refreshment facilities, outings for patients, hairdressing, hand massage and aromatherapy.

They help make life that little bit easier for patients, a helping hand and a friend to talk to. They also help the local community to keep in touch with their NHS, maintaining links and speaking up for the service and those who work in it.

Every year, many thousands of pounds are raised by League volunteers in the Portsmouth and South East Hampshire area to extend or improve the amenities available for patients and clients. BETTER HEALTH

towards the new millennium: the year ahead

This year, the Trust faces a challenging programme of work. Here are some of the key issues it will tackle (a fuller list of the Trust's objectives for the current year is given in the Business Plan for 1999/2000).

Performance matters

A changing NHS. The Trust will work to meet the demands of new legislation set out in the White Papers 'The New NHS' and 'Our Healthier Nation'.

The Health Improvement Plan. A range of key health targets and service objectives will be tackled by the Trust covering cancer, mental health, accidents, asthma, perinatal mortality, the promotion of independent living, cutting health inequalities, primary care and waiting times.

People matter

Quality. The new clinical governance initiative will help develop the quality, consistency and effectiveness of health care within the Trust.

Working together - securing a quality workforce for the NHS. This new national initiative will be implemented to ensure a well trained workforce, effective management and a safe and productive working environment.

Pounds matter

Maintaining financial stability. Services will be subject to greater scrutiny, spending controls will be more stringent and there will be an increasing emphasis on 'value for money'.

Working Time. The new EC directives on working time will be implemented.

Partnerships matter

Primary care. The Trust will support the development of primary care groups, helping them to develop more effective local services.

Maintaining public confidence in services in the face of increasing expectations will be a major challenge and will require a continued commitment to openness, effective partnerships and good communications.

Joint Investment Plan. With social services, the development of services for older people and those with mental health problems will be pursued.

financial analysis 1998/99

This section of the Annual Report summarises the Trust's 1998/99 financial performance using information taken from its Annual Accounts. Copies of the Trust's Annual Accounts are available from Ian Piper, Finance Director, Portsmouth HealthCare NHS Trust, Trust Central Office, St. James' Hospital, Locksway Road, Portsmouth, Hants PO4 8LD.

The areas covered in this section of the report are:

- Performance against Financial Duties
- Summary of Income and Expenditure
- Sources of Income
- How the Money was Spent
- The Board's Remuneration
- Management Costs
- Performance in Paying Suppliers
- Balance Sheet
- Capital Expenditure
- Cash Flow
- Schedule of Recognised Gains and Losses
- Compliance Statement on NHS Managers' Pay
- Non-Medical Education and Training
- Directors' and Auditor's Reports
- Internal Financial Controls Assurance

Performance against financial duties

The Trust complied with all of its financial duties for the year:

Table 1 - Performance against Financial Duties

Financial Duty	Target	Actual
1) Achieve a balanced Income		
and Expenditure position	Breakeven	£85,000 surplus
2) Remain within External		
Financing Limit	(£1,090,000)	(£1,225,000)
3) Achieve required return on assets	5.5% to 6.5%	6.47%

Summary of Income and Expenditure

In 1998/99 the Trust achieved a surplus, after the payment of dividends and interest, of £85,000 (see table 2)

Table 2	2 - Incor	me and	Expenditure	for the	year ended	1 31st M	March 199	99
---------	-----------	--------	-------------	---------	------------	----------	-----------	----

C. C. Starting and Starting	1998/99	1997/98	
	£000	£000	
Income	101,607	96,960	
Operating Expenses	(98,202)	(93,809)	
Operating Surplus	3405	3,151	
(Loss) / Profit on Disposal of Assets	(26)	17	
Surplus Before Interest	3379	3,168	
Interest Receivable	319	281	
Interest Payable	(1,847)	(2,197)	
Dividend Payable	(1766)	(1,212)	
Retained Surplus for the Year	85	40	

Sources of Income

The Trust's total income in 1998/99 was £101.6 million, an increase of 4.7% on 1997/98 (see Table 3)

	1998/99		1997/98		
	£000	%	£000	%	
Health Authorities	87,508	86.1	85,303	88.0	
GP Fundholders	3,872	3.8	3,764	3.9	
NHS Trusts	1,937	1.9	1,772	1.8	
Private Patients	7	-	3	-	
Education	1,004	1.0	625	0.6	
Social Care Income	2,803	2.8	191	0.2	
Other	4,476	4.4	5,302	5.5	
Total	101,607	100	96,960	100	

Table 3 - Analysis of Income

financial analysis

How the money was spent

The Trust's operating expenses were £98.2 million in 1998/99, an increase of 4.7% on 1997/98 (see table 4)

Table 4 - Analysis of Operating Expenses

	1998/99		1997/98	21
	£000£	%	£000	%
Services from Other NHS Bodies	6,914	7.0	6,742	7.2
Directors' Costs	341	0.4	259	0.3
Staff Costs	66,686	67.9	62,509	66.6
Supplies & Services - Clinical	3,999	4.1	3,693	3.9
Supplies & Services - General	2,296	2.3	2,301	2.5
Establishment	3,624	3.7	3,420	3.7
Transport	333	0.3	782	0.8
Premises	8,271	8.5	9,605	10.2
Bad Debts	16	-	33	
Depreciation	2,061	2.1	1,887	2.0
Audit Fees	57	0.1	56	0.1
Other Auditors' Remuneration	27		25	
Clinical Negligence	13	-	113	0.1
Other	3,564	3.6	2,384	2.6
	98,202	100	93,809	100

During the year the Trust spent £33,000 on legal and financial fees associated with the Government's Private Finance Initiative, bringing the total to date to £352,000.

The Board's Remuneration

The total remuneration paid to Board members in 1998/99, inclusive of pension contributions but excluding employers' National Insurance Costs, was £361,000.

1998/99 1997/98
£000 £000
Chairman 22 16
Chief Executive 80 80
Non-Executive Directors 25 22
Executive Directors 234 124
361 242

The increase in Board remuneration reflects the filling of a number of vacancies in 1998/99.

The highest paid Director of the Trust received £83,000 in 1998/99 (1997/98: £80,000).

The Total Remuneration of Board members fell within the following ranges:

Table 6 - Analysis of Directors' Pay

	1998/99	1997/98
£0 to £5,000	1	7
£5,001 to £10,000	4	1
£10,001 to £15,000	0	2
£20,001 to £25,000	2	0
£50,001 to £55,000	0	2
£55,001 to £60,000	2	0
£75,001 to £80,000	1	1
£80,001 to £85,000	1	0
	11	13

The Trust also employs a Personnel Director who is a co-opted member of the Trust Board.

Management Costs

The Trust's 1998/99 management costs were £5,040,000, marginally over the target of £5,006,000. This represents an increase of just 1.6%. No further reduction in management costs is required in the financial year 1999/2000.

Table 7 - Management Costs

	1998/99	% of	1997/98	% of
		Income		Income
	£000		£000	
Management Costs	5,040	4.9%	4,960	5.1%

Performance in Paying Suppliers

The NHS Executive requires NHS Trusts to pay their non-NHS trade creditors in accordance with the CBI prompt payment code and Government Accounting Rules. The target is to pay bills within 30 days of receipt of goods or a valid invoice for the goods, whichever is the later. The Trust's performance against this target is shown in table 8.

Table 8 - Performance in Paying Suppliers

	1998/99		1997/98	
	Number	£000	Number	£000
Total Bills Paid	60,296	21,087	67,268	18,717
Total Bills Paid within Target	54,852	19,832	46,647	15,318
Percentage of Bills Paid within Target	90.9%	94.0%	69.4%	81.8%

Balance Sheet as at 31st March 1999

Table 9 - Balance Sheet at 31st March 1999

	31/3/99		31/3/98
	£000	£000	£000
Fixed Assets		62,534	56,395
Current Assets	3,410		3,202
Creditors: due within one year	(5,384)		(6,117)
Net Current Liabilities		(1,974)	(2,915)
Total Assets Less Current Liabilities		60,560	53,480
Creditors: due after more than one yea	r	(16,337)	(24,622)
Provisions for Liabilities and Charges		(1,573)	(1,022)
TOTAL ASSETS EMPLOYED		42,650	27,836
FINANCED BY:			
Public Dividend Capital		27,339	19,499
Revaluation Reserve		12,233	5,346
Donation Reserve		545	543
Income and Expenditure Reserve		2,533	2,448
TOTAL CAPITAL AND RESERVES		42,650	27,836

Capital Expenditure

During the year the Trust spent £1.55 million on capital schemes. An analysis of this is shown in table 10.

Table 10 - Capital expenditure 1998/99

	£000	
Health Centre Improvements	770	
Disabled Access	31	
Replacement Generators	82	
Vehicles	104	
Learning Disability Community Homes	263	
Small Hospitals Improvements	99	
Information Technology	161	
Equipment	40	
Total	1550	

In addition to the above a total of over £2.2 million was spent on improving environments in premises that the Trust leases from the NHS Executive (St. James' Hospital, St. Christopher's Hospital and parts of the former Coldeast Hospital).

BETTER HEALTH

Cash Flow Statement

The Cash Flow Statement for the year ended 31st March 1999 is shown in table 11.

Table 11 - Cash Flow Statement for the year ended 31st March 1999

	1998/99		1997/98
	£000£	£000	£000
OPERATING ACTIVITIES			
Net Cash Inflow from Operating Activ	ities	5,691	5,062
RETURNS ON INVESTMENT AND SER	VICING OF FINAN	NCE	
Interest Received	309		285
Interest Paid	(1,789)		(2,116)
Interest Element of Finance Leases	(87)		(84)
Net Cash Outflow from Returns on			
Investments and Servicing of Finance		(1,567)	(1,915)
CAPITAL EXPENDITURE			
Payments to Acquire			
Tangible Fixed Assets	(1,565)		(806)
Receipts from Sale of			
Tangible Fixed Assets	247		40
Net Cash outflow from Capital Expend	liture	(1,318)	(766)
DIVIDENDS PAID		(1,766)	(1,212)
Net inflow before Financing		1,040	1,169
FINANCING			
Government Long Term Loans Repaid	(8,843)		(1,228)
Public Dividend Capital Received	7,839		
Capital Element of Finance Leases	(55)		(36)
Other Capital Receipts	185		0
Net Cash outflow from Financing		(874)	(1,264)
Increase (Decrease) in Cash		166	(95)

financial analysis

Statement of Recognised Gains and Losses

Table 12 - Statement of Recognised Gains and Losses for the Year Ended 31st March 1999

1998/99	1997/98	
£000	£000	
1,851	1,252	
6,922	(465)	
0	91	
(33)	(31)	
8,740	847	
	£000 1,851 6,922 0 (33)	£000 £000 1,851 1,252 6,922 (465) 0 91 (33) (31)

Compliance Statement on NHS Managers' Pay

During the financial year ended 31st March 1999 the Trust has complied with the Secretary of State's letter to Chairmen of 29th January 1998, about limits on NHS Managers' pay rises. All staff employed by the Trust, with the exception of medical staff, received a cost of living increase worth 2.6% in 1998/99. The cost of living increase was paid in two instalments, 2% from April 1st with a further 1.8% from December 1st.

Non - Medical Education and Training (MET)

The Trust is a member of the Portsmouth and Isle of Wight Education Purchasing Consortium, which is responsible for commissioning non-medical education and training for all health bodies in the area. In 1998/99 the Lead Trust , in terms of accounting for the income and expenditure of the consortium, was Portsmouth Hospitals NHS Trust.

Directors' and Auditor's Reports

Summary Financial Statements

DIRECTOR OF FINANCE'S STATEMENT

I certify that the preceding summary financial statements have been compiled from, and are in accordance with, the financial records maintained by the Trust and with the accounting standards and policies for the NHS approved by the Secretary of State.

Date 9/8/99

Signature



CHIEF EXECUTIVE'S STATEMENT

I acknowledge the preceding summary financial statements which have been prepared and certified by the Director of Finance, as the summary financial statements which the Trust is required to submit to the Secretary of State.

Date 9/8/99

Signature



DISTRICT AUDIT CERTIFICATE

We have audited the summary financial statements set out on pages 25 to 31 which have been prepared by the Trust and signed as approved by the Chief Executive and Finance Director. Our Audit comprised of a comparison of the statements with the full financial statements and an assessment of the presentation.

In our opinion the summary financial statements are consistent with the full financial statements of the Trust for the year ended 31st March 1999, on which we have issued an unqualified opinion.

Date 9/8/99

Signature



District Audit 20 St. Peter Street Winchester

Summarised Statement of directors' responsibility in respect of internal financial control

The Chief Executive as Accountable Officer, together with the other directors, has a responsibility for ensuring that there is an appropriate* system of internal financial control within the organisation. They also have a responsibility to review the organisation's system of internal financial control as required in HSG(97)17.



In carrying out the review, as set out in EL(97)55, the directors are required to confirm:

- a) that the organisation has an appropriate system of internal financial control; and
- b) that the 'minimum control standards' laid down by the NHS Executive (available with the full accounts) have been in existence within the organisation throughout the financial year.

The directors confirm that they have undertaken the review and the above requirements have been met.

The auditor's report on the full internal financial control statement is attached.

By order of the Board.

Date 15/7/99

Signature

*Appropriate is defined in EL(97)55 as 'fit for the purpose for which they were intended'.

Report by auditors to Portsmouth HealthCare NHS Trust on internal financial control

In addition to our audit work on the financial statements, we have reviewed the statement of directors' responsibilities in respect of internal financial control in compliance with the NHS Executive's directions set out in EL(97)55.

We carried out our review in accordance with the approach set out in the Audit Commission's Technical Release 37/97 relating to internal financial control. This does not require us to perform the additional work necessary to, and we do not, express any opinion on the effectiveness of the Trust's system of internal financial control.

Our review was not performed for any purpose connected with any specific transaction and should not be relied upon for any such purpose.

Opinion

With respect to the directors' statement on internal financial control, in our opinion the directors have provided the disclosures required by EL(97)55 and the statement is not inconsistent with the information of which we are aware from our audit carried out under the Code of Audit Practice.

Date 29/7/99

Martin Parker 20 St. Peter Street Winchester Signature



Code A

would you like to know more?

If you would like to know more about the work of the Trust or have a question or concern about the services we provide please contact us at one of the addresses listed below.

If your are uncertain about how to contact us, call ...

St James Hospital, Locksway Road, Portsmouth, PO4 8LD.

... or, one of our local offices:

Tel: 01705 822444

 Portsmouth City Divisional Office Kingsway House, 130 Elm Grove, Southsea, PO5 1LR.
 Tel

 Havant & Petersfield Divisional Office Civic Offices, Civic Centre Road, Havant, PO9 2AX.
 Tel

 Fareham & Gosport Divisional Office The Potteries, St Christopher's Hospital, Wickham Road, Fareham. PO16 7JD
 Tel

Tel: 01705 434900 Tel: 01705 350010 7JD

Tel: 01329 822269

do you need to contact one of our services?

Acquired Brain Injury Unit

Hamble House St James' Hospital, Locksway Road, Portsmouth, PO4 8LD

Adult Mental Health Services

Acom Lodge (Portsmouth North) Sevenoaks Road, Cosham PO6 3JP Cavendish House (Portsmouth South) 18 Victoria Road South, Southsea PO5 2BZ Central Team (Portsmouth Central) St James' Hospital, Locksway Road, Portsmouth PO4 8LD The Meadows (Fareham & Gosport) Coldeast Way, Sarisbury, Southampton, SO31 7ZS Old Vicarage (Havant & Petersfield) 108 London Road, Purbrook, Portsmouth PO7 5JU Park Way Centre (Havant & Petersfield) Park Way, Havant PO9 1HH Rivendale (Fareham & Gosport) Coldeast Way, Sarisbury, Southampton, SO31 7ZT Tamarine - Respite Care Unit Southwick Road, Denmead, PO7 6XT Thomas Parr House - Assessment Admission Unit Medina Road, Portsmouth, PO6 3NH

Challenging behaviour

Contact Learning Disability services

Children's Services

Bedhampton House 54 Bedhampton Hill Road, Drayton Portsmouth PO9 Child Development Centre 151 Locksway Road, Portsmouth PO4 8LD Child & Family Therapy Service Merlin Centre, Villers Road, Southsea PO5 2NR

Clinics

Battenburg Avenue Clinic North End, Portsmouth PO2 0TA Dunsbury Way Clinic Dunsbury Way, Leigh Park, Havant PO9 5BG Hewat House Clinic 89/91 Bury Road, Gosport, PO12 3PR Northern Parade Clinic Doyle Avenue, Portsmouth PO2 9NF Osborn Clinic Osborn Road, Fareham, PO12 3PR Portsea Clinic Grenville House St George's Square, Portsmouth PO1 3AZ Sylvan Outpatients Department Clinic Coldeast Way, Sarisbury, Southampton, SO31 7ZD

Community Hospitals

Emsworth Victoria Cottage Hospital 8 North Street, Emsworth PO10 7DD Gosport War Memorial Hospital Bury Road, Gosport PO12 3PW Havant War Memorial Hospital 59 Crossway, Havant PO9 1NG Petersfield Hospital Swan Street, Petersfield GU32 3LB St Christopher's Hospital Wickham Road, Fareham, PO16 7DJ

Community Dental, Podiatry & Therapy Services

Contact your local health centre or community hospital. For emergency dental treatment contact : Poswillo Centre Queen Alexandra Hospital, Southwick Hill, Cosham, PO6 3LY

District Nursing & Health Visiting Contact City of Portsmouth Division (above) or your local health centre or community hospital.

Tel: 01705 825535

Tel: 01705 451943 Tel: 01705 894410 Tel: 01705 821912

Tel: 01243 376041 Tel: 01705 524611 Tel: 01705 484256 Tel: 01730 263221 Tel: 01329 286321

Tel: 01705 286146

Drug & Alcohol Services

Drug & Alcohol Services			
Avalon Centre (Fareham & Gosport) St Christopher's Hospital, Wic	kham Road, Fareham, PO16 7DJ		Tel: 01329 281186
Highclere Substance Misuse Residential Unit (Portsmouth City) No		PO6 3EP	
ingretere executive model residential end (encinearity re			Tel: 01705 384728
Kingsway House, Drug & Alcohol Resource Centre (Portsmouth Ci	ity) 130 Elm Grove Southsea PO5	11 R	Tel: 01705 291607
Nelson Substance Misuse Residential Unit (Portsmouth City) St Jan			
Herson substance misuse residential child for thorisonal entry st jan	ics riospital, cocksinaly houd, ron	Sinoutirre	Tel: 01705 894357
The Orion Centre (Havant & Petersfield) Dunsbury Way, Leigh Par	Havant PO9 5BG		Tel: 01730 451500
	K, Havant 109 Jb0		101/30 451500
Family Planning & Sexual Health Services	1.00		
Ella Gordon Unit St Marys' Hospital, Milton Road, Portsmouth PO	3 6AF	P.	Tel: 01705 866301
Elderly Mental Health Services			
Community Psychiatric Nursing Service			
(Portsmouth City) St James' Hospital, Locksway Road, Portsmouth	PO4 8LD	1.	Tel: 01705 822444
The Gables (Havant & Petersfield) 38 New Brighton Road, Emswo	rth PO10 7QR		Tel: 01243 371301
Elderly Services			
Divisional Office for Elderly Medicine and Therapy Services			
South Block Queen Alexandra Hospital, Southwick Hill, Cosham I	PO6 3LY		Tel: 01705 286000
bout boek Queen Alexandra Hospital, boutimer Hin, costant	Anne Ward		Tel: 01705 286941
	Charles Ward		Tel: 01705 286059
	Diana Ward		Tel: 01705 286126
	Dickens Ward		Tel: 01705 286924
	Edith Keen Ward		Tel: 01705 286240
	Elizabeth Ward		Tel: 01705 286432
	George Ward		Tel: 01705 286484
	John Pounds Ward		Tel: 01705 286051
	Mary Ward		Tel: 01705 286116
	Philip Ward		Tel: 01705 286052
	Trevor Howell Day Hospital		Tel: 01705 286356
	Victory Ward		Tel: 01705 286416
St Mary's Hospital Milton Road, Portsmouth, PO3 6AD	victory ward		Tel: 01705 822444
St Mary S Hospitar Millon Koad, Folisinodin, FOS 040	Amulree Day Hospital		Ext 2500
	Jersey House		Ext 3020
	Guernsey Ward		Ext 2520
	Kingsclere Rehabilitation Centre		Ext 2530
Jubilee House Medina Road, Cosham, Portsmouth, PO6 3NH	Kingscrete Renabilitation Centre		Tel: 01705 324034
			101. 01705 524054
Health Centres			
Cosham Health Centre Vectis Way, Cosham PO6 3AW			Tel: 01705 219888
Denmead Health Centre Hambledon Road, Denmead PO7 6NN			Tel: 01705 257114
Eastney Health Centre Highland Road, Eastney, Portsmouth PO4 9	HU Car		Tel: 01705 833111
Fareham Health Centre Osborn Road, Fareham PO16 7ER	1		Tel: 01329 282911
Gosport Health Centre Bury Road, Gosport PO12 3PW			Tel: 01705 554201
Havant Health Centre Civic Centre Road, Havant PO9 2AZ	in by		Tel: 01705 455111
Hayling Island Health Centre Elm Grove, Hayling Island PO11 9/	AP		Tel: 01705 466221
Lake Road Health Centre Nutfield Place, Portsmouth PO1 4JE	A		Tel: 01705 851143
Lee-on-Solent Health Centre Manor Way, Grove Road, Lee-on-Sol	lent, PO13 9JG		Tel: 01705 553333
Portchester Health Centre West St, Portchester PO16 9TU			Tel: 01705 324166
Rowner Health Centre 143 Rowner Lane, Gosport PO13 955	in the		Tel: 01705 511500
Rowner Health Centre 143 Rowner Lane, Gosport PO13 9SS Somerstown Health Centre Blackfriars Close, Somerstown, Portsm Waterlooville Health Centre Dryden Close, Waterlooville PO7 6A	outh PO5 4NJ		Tel: 01705 851180
Waterlooville Health Centre Dryden Close, Waterlooville PO7 6A	l.		Tel: 01705 240340
Home loans service			Tel: 01705 730546
Or contact the City of Portsmouth Division (at top of first page) or	your local health centre or comm	unity hospi	tal
Learning Disability Services			
Divisional Office for Specialist Mental Health & Learning Disabili	ties		
St James' Hospital, Locksway Road, Milton, Portsmouth, PO4 8LD			Tel: 01705 894419
Community Teams	1		Contraction of the second second
Fareham & Gosport			Tel: 01489 578899
Havant & Petersfield		, .	Tel: 01705 266277
Portsmouth City			Tel: 01705 734175

Physical Disability Contact the City of Portsmouth Division or your local health centre or community hospital.

Front cover photograph: Jan Keeley, support worker at Jersey House, St. Mary's Hospital, Portsmouth, in the garden with Judy Howard.

Portsmouth HealthCare NHS Trust Trust Central Office, St James' Hospital, Locksway Road Milton, Portsmouth, Hampshire PO4 8LD Tel: (01705) 894379/822444 Fax: (01705) 293437

