

# Health and Wellbeing Board



Date of meeting: 03 October 2025

Title of Report: **Partner Update from University Hospitals Plymouth NHS Trust**

Lead Strategic Director: Rachel O'Connor

Author: Amanda Nash

## Purpose of Report

To provide partners at the Health and Wellbeing Board with an update on developments at UHP.

## Update Information

### National Oversight Framework and League Table

The Government recently launched the National Oversight Framework (NOF) and associated new performance dashboard and league tables. NHS England has produced an interactive performance dashboard which shows how NHS trusts are segmented (1 to 4) based on their performance against the NOF metrics. [This is available on the NHS England website](#)

High performing trusts in segment 1 may receive greater autonomy while more challenged trusts, particularly those in segment 4, will be offered support or receive interventions. For providers facing the most significant performance or governance challenges intensive, tailored support may be provided through the Recovery Support Programme (PIP) accessed via segment 5. The rankings score NHS trusts on a number of different areas including access to care, effectiveness and experience of care, finance and productivity, patient safety, people, and workforce. University Hospitals Plymouth has been placed in Segment 4 and ranked 109 out of 134 acute hospital Trusts for performance.

Our current position in the national NHS League Tables reflects the ongoing journey of improvement we are undertaking to enhance the services we provide to our population. While our dedicated teams have already delivered significant progress, we recognise that further work is needed to achieve our ambition of being ranked among the top hospital trusts in the country. We are actively delivering against a clear plan to become a high-quality organisation that consistently provides excellent care. This progress is evident in our 'Outstanding for Caring' rating from the Care Quality Commission and in the tangible improvements driven by colleagues across the Trust. Our focus remains firmly on delivering for our patients and fostering a positive organisational culture, making University Hospitals Plymouth NHS Trust a truly great place to work. We are achieving this by empowering clinically led teams and supporting an open environment where staff feel confident to speak up and raise concerns. More information about our recent improvement is available on the Trust website: [National Oversight Framework \(NOF\) and new performance dashboard and league tables | Latest News | University Hospitals Plymouth NHS Trust](#)

### Community Diagnostic Centres

In line with the 10 Year NHS Plan, we are delivering care closer to home and we are building one of eight new Community Diagnostic Centres in the heart of Plymouth. This new, state of the art

healthcare facility, located in Colin Campbell Court, is on main bus routes and easily accessible to people. It is in St Peter's & Waterside ward, which is in the lowest 1% most deprived populations in the country. The Community Diagnostic Centre will provide wider access to critical diagnostic tests for people in this area and wider, offering around 100,000 outpatient diagnostic tests every year including MRI, CT, x-ray scans, lung cancer screening, ultrasound, audiology, ECG point of care testing, and blood tests. The Diagnostic Centre is due to open in summer 2026. A topping out ceremony was held earlier this month to celebrate the structural completion of the new Plymouth Community Diagnostic Centre at Colin Campbell Court. The ceremony marked the building reaching its highest point, a significant milestone in the delivery of the £22 million project. Staff and representatives involved in the development were joined by colleagues from construction partner BAM, commissioning body NHS England, alongside local MPs and Plymouth City Councillors, to mark the occasion.

### **Our vision for the future**

We would like to go further and build a Plymouth Health Village in the centre of the city. Plymouth's City Centre Health Village would increase the capacity of the diagnostic centre and be home to a Neighbourhood Health Hub, which could:

- Co-locate health and wellbeing services, bringing care closer to home, addressing health inequalities for the local population
- Provide care closer to home for Sports and Exercise Medicine, Point of Care Testing, Private patients, Research and Development and Dental Services
- Provide access to sexual health services in a city centre location

This could be a catalyst for the regeneration of the west end of Plymouth City Centre, helping attract other new investment and buildings. We are currently talking to partners such as GPs, Plymouth City Council, education sector providers and others and working on drawing up detailed plans. At the moment it is important to be clear that we have not identified funding for this. A successful bid would be subject to funding sources being available and the financial environment at the time.

We believe this could be a game-changer for healthcare in the city, moving those services which can be provided away from Derriford Hospital to a more central site. This will support local residents to live healthier lives through improved access to a wide range of service including diagnostics, treatment, and research.

### **Working Together in Pathology Services**

Colleagues from each of the four acute trusts across the peninsula have been working together as part of the Peninsula Pathology Network to look at innovative solutions that support the sustainability of pathology services. With the demand for pathology increasing, our vision is to create a sustainable model across Devon, Cornwall and the Isles of Scilly that helps patient pathways to be as effective and efficient as possible.

Colleagues in pathology services have been briefed on the programme and will receive further updates soon. The network is setting up webinars and site visits to go through the options being considered in more detail and seek their input.

Network Clinical Director, Wayne Thomas, describes this as a unique opportunity to explore new ways of working across the peninsula that will benefit patients, provide investment in pathology services and improve clinical safety. The aim of the partnership working is to increase capacity and make pathology services more sustainable and better for patients.

**CQC Rating for Surgery Services**

The Care Quality Commission (CQC) has upgraded the rating of the Surgery Services at Derriford Hospital from 'Requires Improvement' to 'Good'. The CQC completed a full assessment of Surgery Services in April 2025, and reviewed ratings across all 5 key questions: Safe, Effective, Caring, Responsive, and Well-led. Their inspection found services had improved and people were kept safe and protected from avoidable harm, with effective processes in place to monitor quality and safety. Inspectors praised the positive culture, strong leadership, and commitment to patient safety and dignity. Patients consistently described staff as kind, attentive, and respectful, with many highlighting how comfortable they felt during their care. Patients under the care of surgery at University Hospitals Plymouth have seen multiple improvements with decreased waiting times, the development of one stop services and most importantly improved patient experience. As part of their report, the CQC has also given us areas to continue our improvement journey and we have already started our plans to improve in areas such as mandatory training compliance and governance processes and enhancing Pharmacy on surgical wards.

**Stroke Thrombectomy in the South West Peninsula 2024/25**

Thrombectomy is recognised as the most effective intervention for between 10% to 15% of stroke patients who meet the clinical criteria. Fast access to thrombectomy is proven to improve patient outcomes, reducing long term disability.

The National Stroke Audit SSNAP have just published their 2024/25 Thrombectomy results, this summarises the national picture for stroke thrombectomy across the whole year. It shows that the South West Peninsula had the second highest thrombectomy rate in the UK, at 6.7%, representing 229 procedures, the vast majority of which were performed at Plymouth. That is higher than London (6.0%) and second only to Thames Valley (7.8%). The national clinical lead for SSNAP recognised this as a remarkable achievement, based as it is on a service that is not yet 24/7, and means that if thrombectomy is the appropriate treatment, you have a higher chance of a getting this if you have a stroke in the Peninsula than in London. The whole team at Plymouth were recognised, but we also know the reason more people get a thrombectomy is because of the health of functioning clinical network, founded on the collaboration between the clinicians on the ground.

The next steps to go further will be to open the Peninsula thrombectomy service to 24/7 in the coming months, to work with referring teams to ensure all those eligible get equal opportunity irrespective of where they live in the Peninsula and very importantly that we improve the time from arrival in any of the Peninsula Emergency Departments to being transferred and receiving the procedure in Plymouth.

**Unscheduled Care**

In August 2025 the Trust received notification from NHS England that they were introducing a new Urgent and Emergency Care (UEC) Tiering Approach, measured by performance across the preceding quarter for 4 hours, 12 hours and ambulance handovers. The letter confirmed that following a review of University Hospitals Plymouth's (UHP's) UEC performance, and in agreement with our regional team, that UHP would be in Tier 1 for UEC for Quarter 2 of 2025/26. Performance against ambulance handovers over 45 minutes would be reviewed regularly and an improvement in handover times was required for the month of September 2025. Tiering levels will be formally reviewed and agreed on a quarterly basis.

A new Urgent Treatment Centre (UTC), located in the brand-new three-storey Dartmoor Building at Derriford Hospital opened this month. The UTC is a walk-in facility and is available to treat injuries and illness which are not life-threatening but still require urgent treatment. The new UTC will provide treatment in addition to the Cumberland Centre in Devonport and Minor Injury Units in Tavistock and Kingsbridge. This increased capacity in the local area will ease the pressure on Derriford Hospital's

Emergency Department, enabling emergency medicine specialists to focus on patients who are seriously unwell.

You should visit the UTC if you have an injury which is not life-threatening, such as:

- Limb fractures
- Minor illness
- Sprains and strains
- Minor head injuries
- Minor scalds and burns
- Bites and stings
- Foreign body in eyes
- Infected wounds and cuts

The Dartmoor Building, which houses the new UTC, will shortly also become home to other key hospital services, such as the Fracture Clinic, Main Outpatients and Pre-operative assessment.

### **Planned Care**

The Surgery Care Group ceased insourcing activity in theatres as of April 2025. To support elective recovery, weekend working at double-time rates was introduced for an initial four month period beginning in July 2025. In August 2025, 76 additional patients were treated under this arrangement, with further activity anticipated in September 2025. To ensure sustainability, the Care Group is actively recruiting to enable planned, regular six day working. This is expected to be implemented across key specialties including Urology, Colorectal, Spinal, Gynaecology, and Hepatobiliary/Oesophagogastric.

In August 2025 the Trust received confirmation from NHS England that University Hospitals Plymouth (UHP) that following a review of elective, cancer and diagnostic performance, and in agreement with the national team, that UHP would be in Tier 2 for Elective and Cancer for Quarter 2 of 2025/26. Delivery progress would be reviewed regularly, with Tiering level being formally reviewed and agreed on a quarterly basis.

### **For patients with suspected cancer**

- 28-Day Faster Diagnosis Standard: 82% of patients with suspected cancer received a diagnosis within 28 days of being referred in August 2025.
- 62-Day Treatment Standard: 65% of patients were treated within 62 days, underperforming against the national target of 75%. We remain focused on recovering this, particularly by supporting urology and lung services.

### **Maternity Pilot Shifts First Appointments to Face-to-Face**

The maternity team has recently introduced a key change aimed at improving patient experience and the quality of early care by moving patients first antenatal booking appointments from over the phone to face-to-face.

Following feedback from service users, the team has been trialling in-person appointments for some expecting patients. The new approach first rolled out in July 2025 and, after some refinements, has relaunched in August. Since then, many patients have commented the experience has been noticeably better in comparison to previous pregnancies, where first contact was over the phone.

This change is part of a wider maternity and neonatal improvement programme, which looks at ways we can offer more personalised care right from the beginning.

**Appointment only system to be introduced for blood tests at the Phlebotomy Community Hub at Windsor House**

University Hospitals Plymouth NHS Trust and NHS Devon are introducing a major improvement to the way patients have their blood tests at Windsor House. From 6 October 2025, we're introducing a new online booking system through SwiftQueue to make patients' experience quicker and easier. Patients who have been referred to have their blood tests will need to book their appointment online before attending Windsor House. This change is a direct response to patient feedback and operational challenges, ensuring that people have a more comfortable and timely experience when attending for their blood tests. Instead of waiting in long queues, patients will be able to book, change, or cancel their appointments online at a time that works best for them.

Patients will also get reminders and updates, so they know exactly when and where to go, helping you feel more prepared and reducing the chance of missed appointments. By managing appointments in advance, we can keep the service running smoothly and reduce overcrowding, making visits more comfortable for everyone.

If an urgent blood test cannot be completed at the patient's clinic or GP practice, their clinician can refer them to Windsor House, where they will be able to drop in. The Derriford Outpatients Department will follow the same system shortly after Windsor House. Patients with routine blood tests will be able to choose which location suits them best. Some specialist tests must be done in the Outpatients Department so the samples reach the lab in a timely manner.

[For more information visit our phlebotomy page](#)

**Relevance to the Corporate Plan and/or the Plymouth Plan**

Partner update