# Annual Review 2015/16















#### Welcome from our Chair and Chief Executive

Two years ago I noted that the organisation had not been where it should be, that it was fast improving, but that it would take time. Our journey has continued in a positive direction. Our clinical performance is significantly improved in most areas. We have the finances under good control. We are starting to see real progress in recruitment, and staff satisfaction levels are increasing. Our partnership with the Virginia Mason Institute is already showing impressive improvements in the way we work.

But if we are to "leapfrog the average", as I think this organisation can do, we have much yet to resolve. We still require our staff to be heroic, particularly over the winter. The essential fragility in some parts of the system (I'm thinking in particular about A&E) remains unresolved. Our people still do not feel sufficiently supported by the organisation. The wider health system, of which we are part, lacks proper coherence. It has not yet worked through how we turn these sickness mechanisms into a health movement, as much focused on well-being as on treating illness.

The way forward from here has a number of key parts. We need to play our part in helping the wider system be more coherent and ambitious. As a hospital Trust, we must aim to be the safest and kindest of our kind. We need to listen better, and explain more clearly, and to hold ourselves thoroughly to account, to our communities. We need to blame the process not the person, to learn how to learn, and to balance compliance with innovation. A challenging agenda - but an important one.

#### Peter Latchford Trust Chair

Since joining in late September I have been walking our sites, meeting staff, attending department meetings and hearing great stories about high quality safe healthcare. During the year, our organisation took over the chair of the Local Education Committee for Shropshire and Staffordshire and the system Sustainability and Transformation Programme. We also invested over £8million in facilities and equipment, including the £500,000 new cubicles in the A&E Department at the Princess Royal Hospital and the £2million new Mortuary at the Royal Shrewsbury Hospital alongside two new state-of-the-art CT scanners.

Our success in securing the five-year partnership contract with the Virginia Mason Institute (VMI) in Seattle has seen us working with NHS Improvement and four other Trusts as we roll out learning and engagement across our organisation, embarking on the same journey which took the VMI from a challenged hospital to 'USA Hospital of the Decade' and one of the safest hospitals in the world.

During the year, the Trust was awarded the prestigious international Baby Friendly Award from UNICEF (United Nations Children's Fund), Employer of the Year in the Energize Awards and the CHKS Top 40 Hospitals award for the third year in a row. Like many organisations of our size we need to strive to be even better and ensure we consistently deliver against every performance marker. This winter has been another challenging period but the huge efforts of all of our staff saw no patient breaching the 12-hour wait while our Trust was amongst a very small group to routinely deliver the cancer access targets and the 18-week Referral To Treatment (RTT) standard alongside an improving financial position. It's been a tough year but so much has been achieved by our great teams.

Our Sustainable Services Programme work on the Strategic Outline Case (SOC) moved to completion and was approved by our Board. This allows our system partners alongside our Trust to look to create a new future for our hospitals and help us address our staffing frailties – although the SOC is just the start of a significant piece of work which you'll hear more about throughout 2016/17. A single site for the county's emergency department is the best way to ensure our

patients receive safe and dignified care in the right place at the right time and that we continue to attract the best doctors and nurses and have facilities which are fit for the 21st century. As we look further into 2016 we will see the Trust launch its very first Leadership Academy, a clear strategy to move into financial surplus and play a full part in the Sustainability and Transformation Plan (STP) for Shropshire and Telford & Wrekin that I am leading, creating a Healthcare System five year strategy to deliver one unified vision for

our population supporting the development of neighbourhood models of care in support of our rural footprint. We will work ever closer with our universities to enhance our educational offers, begin the redesign of urgent care and invest over £8million in new facilities and equipment. I'm sure 2016/17 will be a very exciting and pivotal year!



Simon Wright Chief Executive

#### At a glance: 2015/16 in numbers



We provide care for more than 500,000 people in Shropshire, Telford & Wrekin and mid Wales.

Our vision is for the communities we serve to be the healthiest half million population on the planet.

#### In the year we had:



- 61,315 elective & daycase spells;
- 54,839 non-elective inpatient spells;
- 6,659 maternity admissions;
- 407,108 consultant-led outpatient appointments; and,
- 121,105 A&E attendances.



# Our turnover was in the region of £326 million



We employed:

4,921 full-time staff in total comprising:

- 551 fte\* doctors and dentists (11%)
- 1,430 fte nursing and midwifery staff (29%)
- 642 fte scientific, technical and therapies staff (13%)
- 1,337 fte other clinical staff (27%)
- 961 fte non-clinical staff (20%) \*fte refers to full time equivalent

#### THANK YOU TO EVERYONE FOR YOUR SUPPORT IN 2015/16

Thank you to all of our patients, staff, volunteers, partner organisations and the wider community for all of your support during 2015/16. Thank you also to our apprentices who have been starting their careers by taking on roles at SaTH. We're proud to have helped them at the start of their working life—one has more recently won a regional award for her efforts.

We welcome your feedback about the services we provide—please visit our website at www.sath.nhs.uk/patients-and-visitors/pals to share your experiences.

## A journey through some of the



#### April 15



More than 70 individuals & teams honoured as Winter Heroes

#### **May 15**



SaTH awarded CHKS Top 40 Hospitals for third year in a row

#### **November 15**



SaTH named as Employer of the Year at Regional Energize Awards

#### October 15



First group of Staff Nurses recruited from the Philippines start at Trust

#### **December 15**



£1.89million Swan Bereavement Suite opens at RSH

#### January 16



Additional cubicle facilities open at the PRH A&E in Telford

#### **February 16**



SaTH receives UNICEF's prestigious international Baby Friendly Award



#### Find out

More details about these items can be found in the News Archive at M Annual Report, which is available on our website at

### milestones at SaTH in 2015/16

#### June 15



Hospital-to-hospital fundraiser raises £15,000 for charities

#### **July 15**



Five-year partnership with Virginia Mason Institute in Seattle begins

#### **September 15**



Simon Wright joins the Trust as our new Chief Executive

#### **August 15**



Around 120 Junior Doctors begin their NHS careers as they join SaTH

#### March 16



Intensive week to improve care for Respiratory patients takes place 2016/17 (SEE PAGE 8)

#### t more

www.sath.nhs.uk and a detailed look at 2015/16 can be found in our
www.sath.nhs.uk/about-us/annual\_report.aspx



#### Our Quality Account 2015/16 at a glance

Our Quality Account 2015/16 provides a look back at our performance against objectives for the year—and looks ahead at our objectives for 2016/17. This page provides an overview of what we achieved in 2015/16. The full Quality Account can be found on our website at www.sath.nhs.uk/about-us/quality\_account.aspx

Our priorities for the year included a focus on three areas. The following is what we achieved during the year in those areas:

#### **End of Life Care**

- A total of 1,162 clinical staff attended End of Life Care sessions.
- We implemented the Swan Scheme to represent End of Life and bereavement care.
   Feedback has been positive.
- All wards have been issued with Swan memory boxes, containing useful items such as toiletries.
- Major improvements were made to mortuary facilities, including a new Swan Bereavement Suite and improvements to viewing rooms across the Trust.

#### **Acute Medical Needs: Respiratory Care**

- An Ambulatory Care Unit was introduced at the Royal Shrewsbury Hospital, which has reduced the time a patient with respiratory disease waits to be assessed and treated by 50%, meaning more patients are seen and treated quickly without being admitted.
- We have introduced a programme to develop the role of the Advanced Care Practitioner (ACP) across the Trust. They perform physical and/or mental health assessments of patients with acute care needs.

#### **Dementia Care**

- We have recruited a Dementia Clinical Nurse Specialist, Karen Breese (pictured), to promote good practice and support staff training.
- Karen is working with carers and other healthcare staff to promote and improve the care of patients with dementia.
- On-going promotion of the Carers Passport and the "This is Me" patient passport.
- Improved care for patients with dementia and their carers by focusing on personalised assessment and care plans.
- We improved the environment on some wards to make them dementia-friendly.

During 2015/16 we made improvements to the safety of patients, although we recognise we can do better:

#### **Falls**

- The total number of falls in 2015/16 decreased by 6.5%, with a total decrease of 16% in the number of reportable falls since monitoring began in 2011/12.
- We have also seen a reduction of the level of harm caused to patients, which has decreased by 42%.



We reported 0 avoidable Grade 4
pressure ulcers and 7 avoidable
Grade 3 pressure ulcers—the
same as in 2014/15.

#### **Healthcare-acquired Infections**

- We had 1 case of MRSA Bacteraemia.
- We reported 30 cases of C difficile against a target of 25, compared with 29 during 2014/15.

#### **Serious Incidents (SIs)**

- We reported 60 SIs during 2015/16, compared with 97 during 2014/15.
- 100% of SIs were openly reviewed and shared with patients and their relatives.

#### **Never Events**

Sadly, the Trust reported 2 never events—serious incidents that are wholly preventable—during 2015/16. No harm came to the patients, but the Trust recognises they should not have happened. These were the first never events identified for over three years and have triggered in-depth reviews and improvements to practice to enhance safety procedures.





#### Focus on our performance during 2015/16

Domain	Indicator	Description	Data Source	Thresholds	Performance in Year Ended 31 March 2016
	Four-hour maximum wait in A&E from arrival to admission, transfer or discharge	The number of patients spending four hours or less in all types of A&E department/The total number of patients attending all types of A&E department	Weekly SitReps	Performing: 95% Underperforming: 94%	85.55%
	12 hour trolley waits	The number of patients waiting in A&E departments for longer than 12 hours after a decision to admit	Weekly SitReps	Performing: 0 Underperforming: >0	0
	1 hour ambulance handovers	Ambulance handovers not completed within 60 minutes	Weekly SitReps	Performing: 0 Underperforming: >0	268
	30 minute ambulance handovers	Ambulance handovers not completed within 30 minutes	Weekly SitReps	Performing: 0 Underperforming: >0	852
Access (including	R⊤ – admitted – 90% in 18 weeks	Total number of completed admitted pathways where the patient waited 18 weeks or less vs. Total number of completed admitted pathways in quarter	Monthly RTT returns via UNIFY	Performing: 90% Underperforming: 85%	70.46%
A&E and 18 weeks Referral to	RTT – non-admitted – 95% in 18 weeks	Total number of completed non-admitted pathways where the patient waited 18 weeks or less vs. Total number of completed admitted pathways in quarter		Performing: 95% Underperforming: 90%	93.34%
Treatment [RTT])*	R∏ - incomplete pathways	Total number of patients on incomplete pathways less than 18 weeks vs. total number on incomplete pathways		Performing: 92%	91.44%
	RTT – greater than 52 weeks	Total number of patients waiting longer than 52 weeks from referral to treatment		Performing: 0	1
	% of patients waiting over 6 weeks for a diagnostic test	To measure waits and monitor activity for 15 key diagnostic tests		Performing: <=1%	0.56%
	28 day readmission	Number of patients cancelled on day of surgery not readmitted within 28 days	Quarterly return via UNIFY	Performing: 0	3
	Multiple cancellations of urgent operations	Number of urgent operations cancelled more than once	Monthly return via UNIFY	Performing: 0	0
	2 week GP referral to 1 <sup>st</sup> Outpatient	Please see cancer waiting times guidance for definition of these performance standards  Please see cancer waiting times guidance for definition of these performance standards	Cancer Waiting Times Database Cancer Waiting Times Database	Performing: 93% Underperforming: 88%	94.93%
	2 week GP referral to 1 <sup>st</sup> outpatient – breast symptoms			Performing: 93% Underperforming: 88%	95.1%
	31 day diagnosis to treatment for all cancers			Performing: 96% Underperforming: 91%	98.17%
	31 day second or subsequent treatment – drug			Performing: 98% Underperforming: 93%	100%
Cancer	31 day second or subsequent treatment – surgery			Performing: 94% Underperforming: 89%	94.98%
Waiting Times	31 day second or subsequent treatment – radiotherapy			Performing: 94% Underperforming: 89%	98.58%
	62 days urgent GP referral to treatment of all cancers			Performing: 85% Underperforming: 80%	85.47%
	62 day referral to treatment from screening			Performing: 90% Underperforming: 85%	95.55%
	62 day referral to treatment from hospital specialist			Performing: 85% Underperforming: 80%	88.68%
	Publication of formulary	Publication of formulary		Performing: Yes	Yes
	VTE Risk Assessment	Number of adult inpatient admissions reported as having a VTE risk assessment on admission	UNIFY Mandatory returns	Performing: 95% Underperforming: 90%	95,33%
Quality of	Valid NHS number submitted in acute datasets	Number of spells or attendances without valid number/Total number		Performing: 99%	99.79%
Care	Valid NHS number submitted in A&E datasets	Number of attendances without valid number/Total number		Performing: 95%	98.73%
	Duty of Candour	Number of breaches of duty of candour		Performing: 0	0
	Breaches of same sex accommodation	The number of breaches	Collection via UNIFY	Performing: 0	0
Infection	MRSA	Actual number of MRSA vs. planned trajectory for MRSA	HPA Returns	Performing: No MRSA bacteraemias	1
Prevention and Control	C.Diff	Actual number of C.diff vs planned trajectory for C.diff		No more than 25 C.diff	30
	Sickness absence	Number of days sickness absence vs. available workforce	Sa⊤H returns	Performing: 3.99%	4.16%
Workforce	Appraisal	Number of eligible staff receiving appraisal in current performing vs. total eligible staff		Performing: 80% (stretch target 100%)	86%
	Statutory and Mandatory Training	Number of staff up-to-date with Statutory and Mandatory Training		Performing 80%	79%

<sup>\*</sup>From 1 October 2015, a single measure of RTT performance was introduced. The incomplete standard identifies patients waiting to start treatment and since this was introduced the Trust achieved the target for four months out of six.

#### **Staff and patient feedback**

Our 2015 Staff Survey results showed that 57% (up from 50% in 2014) of staff would recommend the Trust as a place to work and 62% (up from 54% in 2014) would be happy with the standard of care provided if a friend or relative needed treatment.

Our public Friends and Family Test showed that overall for 2015/16 96.4% of inpatients would be likely to recommend the ward they were treated on to friends and family if they needed similar care and treatment.



# Key dates for your diary



Wednesday 31 August	Launch of Transforming Care Institute	Separate launches at Royal Shrewsbury Hospital and Princess Royal Hospital			
Saturđay 3 September (11am-3.30pm)	Family Fun Day followed by our Annual General Meeting at 4pm	Hamar Centre at the Royal Shrewsbury Hospital			
Tuesday 20 September	Launch of third value stream as part of our Transforming Care work in our Virginia Mason partnership	SaTH-wide launch (physical launch and promotion on intranet/website etc)			
Thursday 29 September (1pm)	Trust Board Meeting	Park Inn, Telford			
Thursday 29 September	VIP (Values in Practice) Awards celebrating the outstanding achievements of staff and volunteers	Park Inn, Telford			
Thursday 6 October	Chris Hopson, Chief Executive of NHS Providers visiting SaTH as part of our Virginia Mason Institute partnership	Royal Shrewsbury Hospital			
Fríday 11 November	SaTH's annual Leadership Conference and launch of Leadership Academy	Royal Shrewsbury Hospital and video link to Princess Royal Hospital			
Thursday 1 December (2pm)	Trust Board Meeting	Education Centre, Princess Royal Hospital			
Fríday 2 December	Celebration of 2016 and look forward to 2017	Across all of our sites			
Thursday 2 February 2017 (2pm)	Trust Board Meeting	Education Centre Princess Royal Hospital			
Thursday 30 March 2017 (2pm)	Trust Board Meeting	Shropshire Conference Centre Royal Shrewsbury Hospital			
*Staff only events are written in blue					

This Annual Review 2015/16 provides an overview of the year. For a full and in-depth look at 2015/16 at The Shrewsbury and Telford Hospital NHS Trust please read our Annual Report (including our Quality Account, Financial Statements and Governance Statement), which can be found on our website at www.sath.nhs.uk/about-us/annual\_report.aspx

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Make It Happen
We Value Respect
Together We Achieve