

# Welcome to the Annual General Meeting (AGM)

30 August 2023



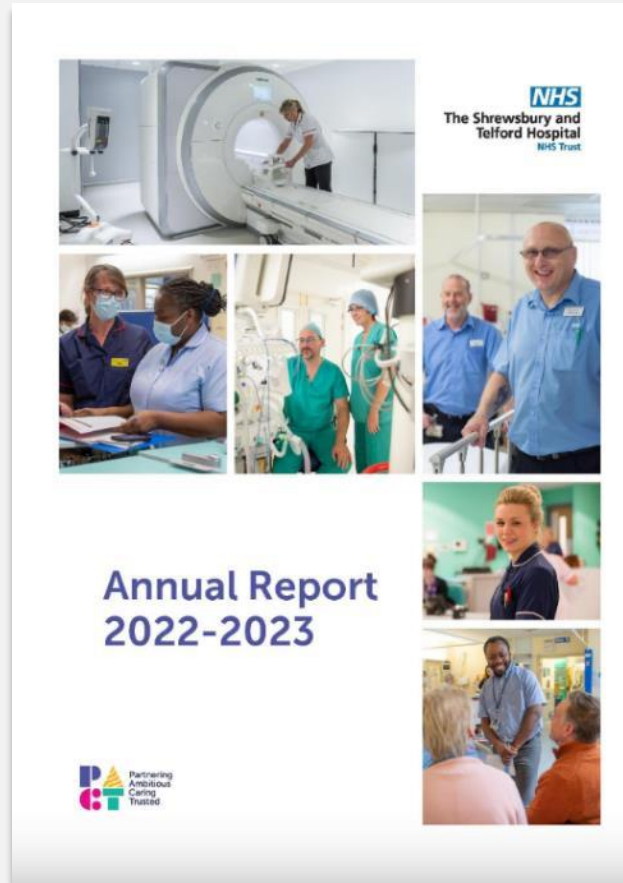


# Welcome

## Dr Catriona McMahon

Chair

# 2022-23 Annual Report and Accounts



[www.sath.nhs.uk/about-us/our-performance/annual-reports-and-accounts/](http://www.sath.nhs.uk/about-us/our-performance/annual-reports-and-accounts/)

Agenda item	Name
Welcome	Dr Catriona McMahon, Chair
Review of the Year 2022-23 and Forward Look	Louise Barnett, Chief Executive
Financial Review 2022-23	Helen Troalen, Director of Finance
External Auditor Report	Liz Gardiner, KPMG
Our quality, safety and maternity developments	Dr John Jones, Executive Medical Director Hayley Flavell, Director of Nursing
Our performance	Sara Biffen, Acting Chief Operating Officer
Our people	Rhia Boyode, Director of People and OD
Trust Chair's Report	Dr Catriona McMahon, Chair
Receiving the Annual Report and Accounts	Dr Catriona McMahon, Chair
Question and answer session	
Closing remarks	Dr Catriona McMahon, Chair





# Review of the year 2022-23 and Forward Look

**Louise Barnett**  
Chief Executive



# Reflections on 2022-23

- Our vision and values
- A challenging year for the Trust and NHS nationally
- Remain rated as inadequate by the CQC
- Managing unprecedented demand for emergency care
- Working to restore elective, cancer and diagnostic services
- Ongoing impact of COVID-19
- Significant financial deficit
- Our teams, partners and community



# Our focus during 2022/23

- Listening to our staff, patients and families
- Building on the previous progress made
- Driving quality improvement
- Investing in our teams and culture change programme
- Strengthening governance
- Securing investment to improve services
- Transforming our estates to deliver a positive environment
- Encouraging new ways of working and innovation

**We are making real improvement on our journey  
towards Getting to Good.**





# Making a difference for patients



Whilst challenging, our teams have continued to deliver tangible improvements in the quality of care for patients:

- Reduced **waiting times** but more to go
- Restored elective **orthopaedic** services at PRH
- New digital **robot** transforming surgical care for patients
- New **acute medical floor**
- Improvement in **radiology performance**
- Opened new **ambulance receiving areas**
- **Enhanced care supervision team**
- Refurbished/ expanded **endoscopy suites** at PRH and RSH
- Governance and **Board Assurance Framework**
- Finalist **Student Nursing Times Awards** - practice education facilitators
- Won **Health Care Supply Association (HCSA) award** - Shropshire Healthcare Procurement Service

# Annual Governance Statement (AGS)

The AGS for 2021-22 identified a number of risks that were carried forward into 2022-23:

- Quality of care, including standards of performance and licence conditions
- Access and waiting time performance
- Implementing recommendations of the independent review of maternity services
- Improving financial performance
- Regulatory fire issues

Continuing to make positive progress on our Getting to Good journey remains paramount.



# Sustainable and meaningful change in Maternity Services

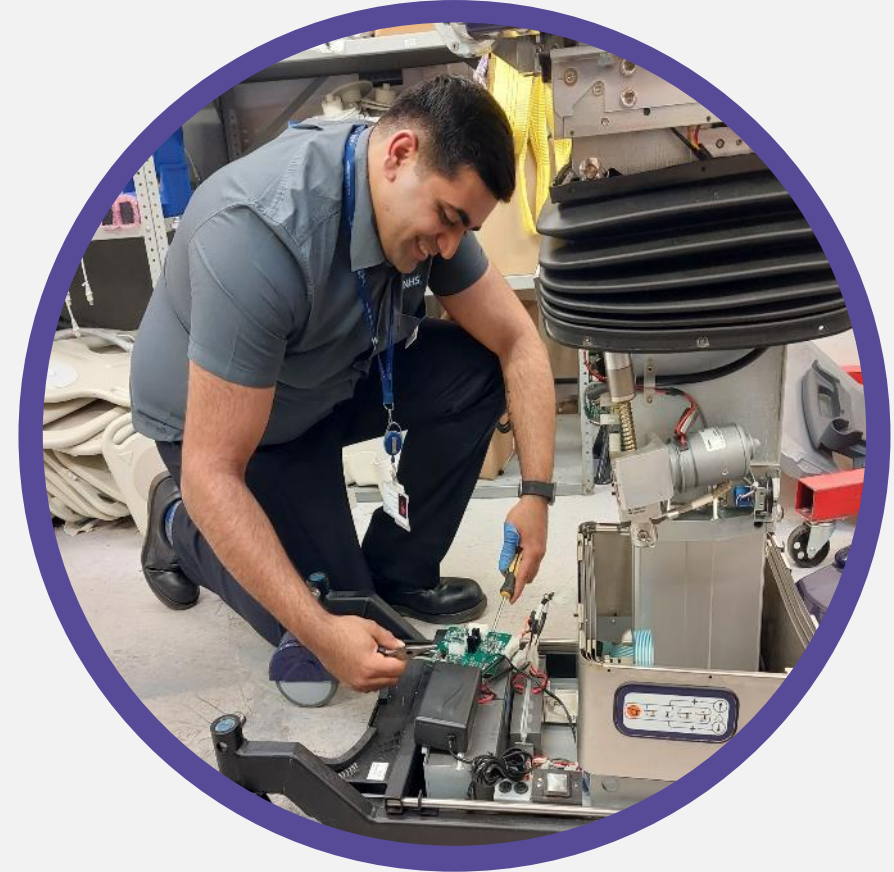


- Good progress against the 210 Ockenden actions set out in the first and final Ockenden reports
- We are ahead of our projected delivery schedule for our actions
- We continue to establish robust evidence and assurance of sustainable and meaningful change
- We recognise there is more to do and we owe it to those who experienced poor care to deliver safe, compassionate and personalised care
- More and more women are telling us they feel confident about giving birth at the Trust
- Our priority is to continue to listen to and support families to have the birthing experience they want

**Thank you to our Maternity Voices Partnership - ensuring that women's voices are placed at the heart of the care we provide.**

# Valuing our amazing teams

- Improved **2022 National Staff Survey** results
- **Cultural change** programme
- **Freedom to Speak Up**
- **Leadership Development** programmes
- New **Staff Psychological Wellbeing Hub**
- Supported **183 apprenticeships**
- **93 internationally educated nurses**
- Level 2 of the **Disability Confident** scheme
- **Inclusion and belonging** – valuing everyone
- Established **Healthcare Support Worker Academy**
- ‘**Growing our own**’ programme



**A massive thank you to our fantastic teams and wonderful volunteers.**

# Looking Forward

Despite ongoing pressures, 2023-24  
is a year of opportunity for the Trust





# Getting to Good: Our objectives for 2023/24

**The Operational Plan** sets out our collective priorities for 2023-24 to tackle our challenges and drive forward our key transformational programmes.

It builds upon the positive progress we achieved in 2022-23, which established strong foundations for the year ahead.

1

Deliver phase three of our Getting to Good Programme to continuously improve care for our patients and community standards

2

Restore and sustain elective orthopaedics and other services

3

Achieve the 28-day faster cancer diagnosis standard for patients

4

Improve the flow through our hospitals by delivering our Emergency Care Improvement Programme

5

Improve efficiency, deliver within our budget, demonstrating financial prudence and making every penny count



# Getting to Good: Our enablers for 2023/24

In addition to our five objectives, we have identified **five key enablers** to deliver improved care.

**1** **Value difference** and live the People Promise in our teams

**2** **Progress our Hospitals Transformation Programme** plans to improve care for all

**3** **Implement phase one of our Electronic Patient Record (EPR) programme**  
- includes replacing the Patient Administration System

**4** **Estates** – develop an estates plan to optimise our current estate

**5** **Information Governance**  
– improve culture and practices across the Trust



# Improving care and experience for all

## Quality priorities



## Workforce priorities

- Supporting the health and wellbeing of our people
- Creating a great employee experience
- Ensuring inclusion and belonging for all
- Supporting and developing our people
- Leading improvement, change and innovation
- Eliminating conditions in which bullying and harassment occurs



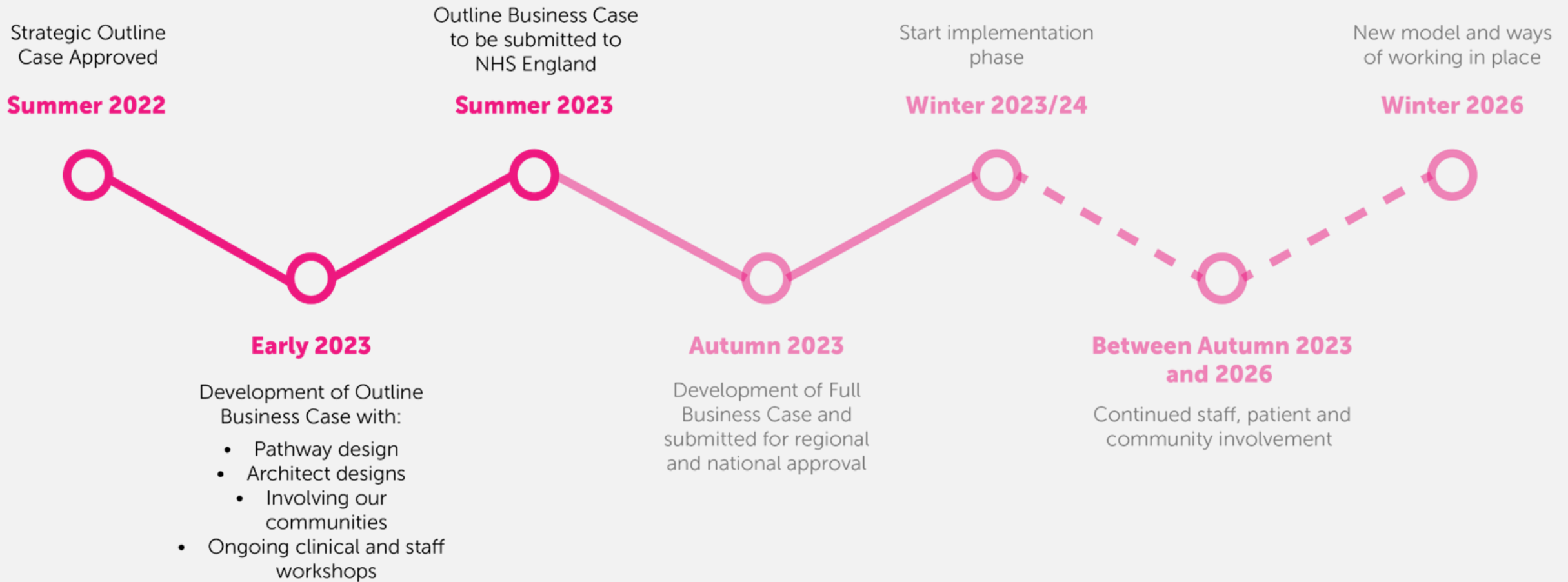
# Transforming care through technology



## Our Electronic Patient Records Programme will bring significant benefits for patient care

- Committed to digital - reducing paper and duplication
- Significant investment
- Old Patient Administration System – to be replaced
- Revolutionising the way we work:
  - Transferring 1million patient records
  - Training many colleagues across the Trust
- Building the necessary foundations for further investment, supporting clinical teams and enhancing patient care

# Progressing our Hospitals Transformation Programme to improve care for all



# Developing two thriving hospitals

- In 2022/23 our Strategic Outline Case was approved
- We remain on track, seeking approval for the Outline Business Case
- The multi-million pound service changes will improve care for all people across Telford and Wrekin, Shropshire and mid Wales:
  - Planned care services will be available throughout the year leading to fewer cancellations and delays for operations
  - Improved emergency care services will be delivered from a modern, purpose-built Emergency Department, meaning that patients will be seen more quickly, with shorter stays and faster ambulance handover times
  - 24/7 urgent care at both PRH and RSH (through an A&E local model at PRH)
- We know change is necessary to sustainably deliver and improve the care our patients receive

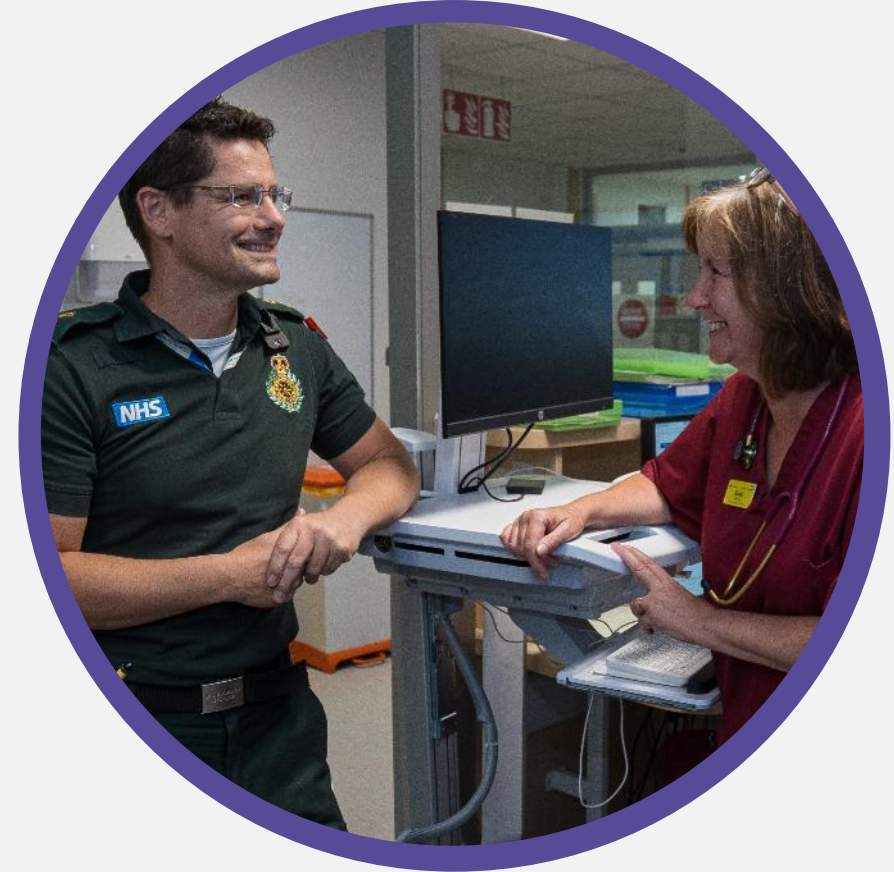




# Working with our partners

**We are committed to delivering truly integrated care for patients and developing our services for our communities:**

- Deliver our responsibilities in the ICS Joint Forward Plan
- Enable the Local Care Transformation Plan
- Invest in new sub-acute beds at both sites
- Grow the Virtual Ward service
- Open the first Community Diagnostics Centre, including modern renal facilities at Hollinswood, Telford





Thank you to our dedicated colleagues, volunteers and partners for everything you continue to do to support our patients.



# Thank you

We remain incredibly grateful  
for everyone's engagement,  
feedback, and for your  
continued support.







# Financial review 2022-23

**Helen Troalen**  
Director of Finance



# Context

- Challenging financial year
- Restoration of elective activity
- Out of hospital capacity
- Capital investment



# Financial Performance 2022/23



## Revenue in-year:

- Deficit plan of £19.1m; actual outturn £47.2m
- Driven by unfunded Covid related costs and use of escalation capacity

## Revenue underlying plan:

- Deficit plan of £32.7m; actual outturn £34.4m
- Driven by inflationary pressures

## Capital expenditure:

- £57.3m spend in total, in line with plan - £19.8m internally generated funds; £37.5m centrally funded public dividend capital



# Key investments 2022/23

## Revenue

- Acute Medical floor (RSH)
- Safe staffing for ward templates
- Radiology workforce
- Maternity

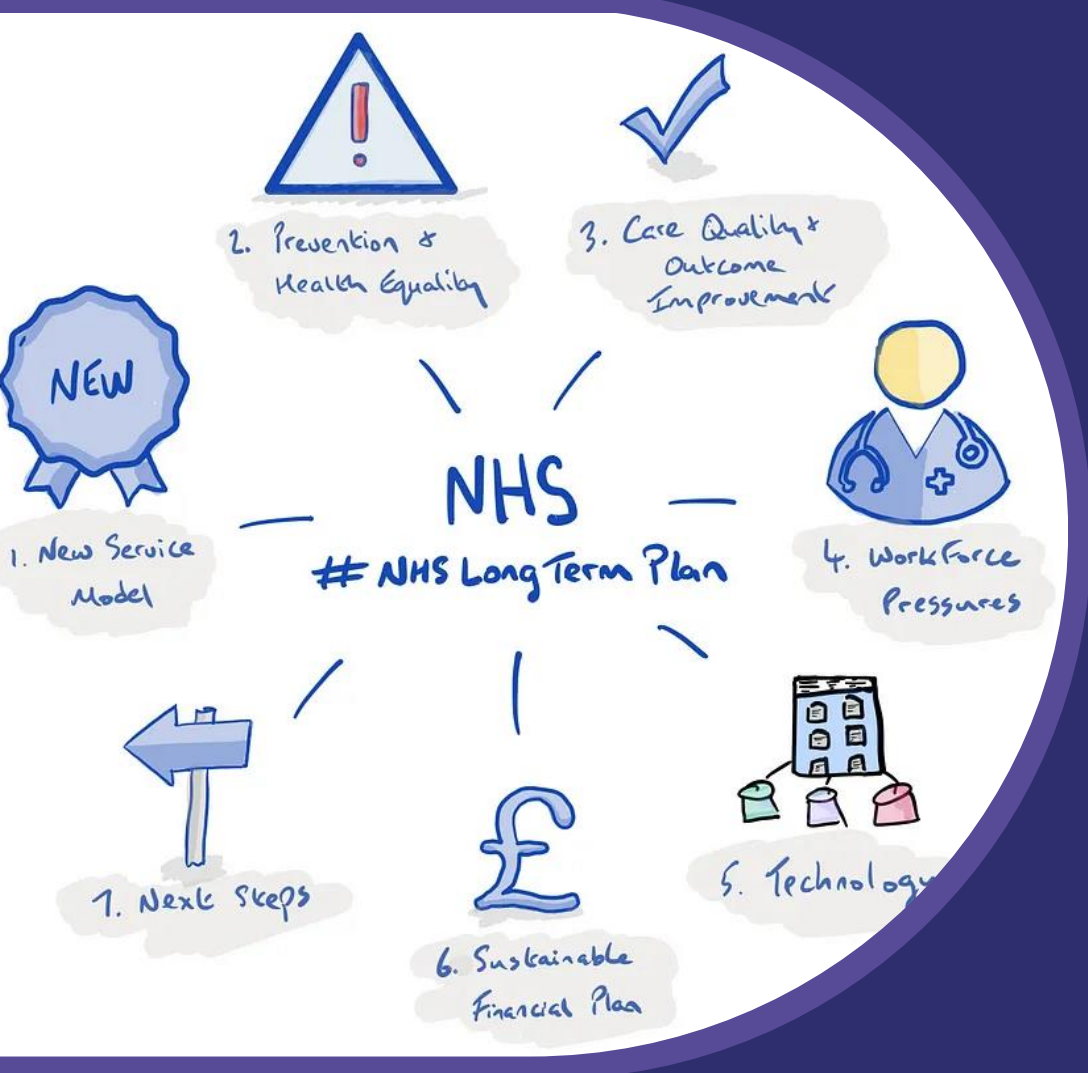
## Capital

- Community diagnostic hub
- Digital infrastructure
- Telford elective care hub
- Surgical robot
- Equipment replacement

# Financial Planning 2023/24

- Agreed a £45.5m deficit plan (revenue)
- Significant risk identified at the planning stage
- Reduction of escalation spaces and agency staffing key
  - Requires effective system capacity planning and solid recruitment pipeline
- Capital plan £42.1m

# Financial Planning 2023/24



- Activity plan (elective restoration)
- Bed plan (escalation reduction)
- Staffing plan (agency reduction)
- Efficiency plan
- Underpinned by improved financial governance





# Report from the External Auditor

**Liz Gardiner**  
KPMG



# Team Members

Supporting team from KPMG's Public Sector Audit Department



**Andy Cardoza**  
Engagement Lead

*"I am responsible for delivery of all of our services to the Trust. I lead/will lead all of our key meetings and presentations to management, along attending the Audit and Risk Assurance Committee"*



**Tony Felthouse**  
Senior Manager

*"I oversee the audit team and work with Andy to ensure the quality of our audit work. Along with Andy, I meet the Audit and Risk Assurance Committee Chair and Director of Finance on a regular basis"*

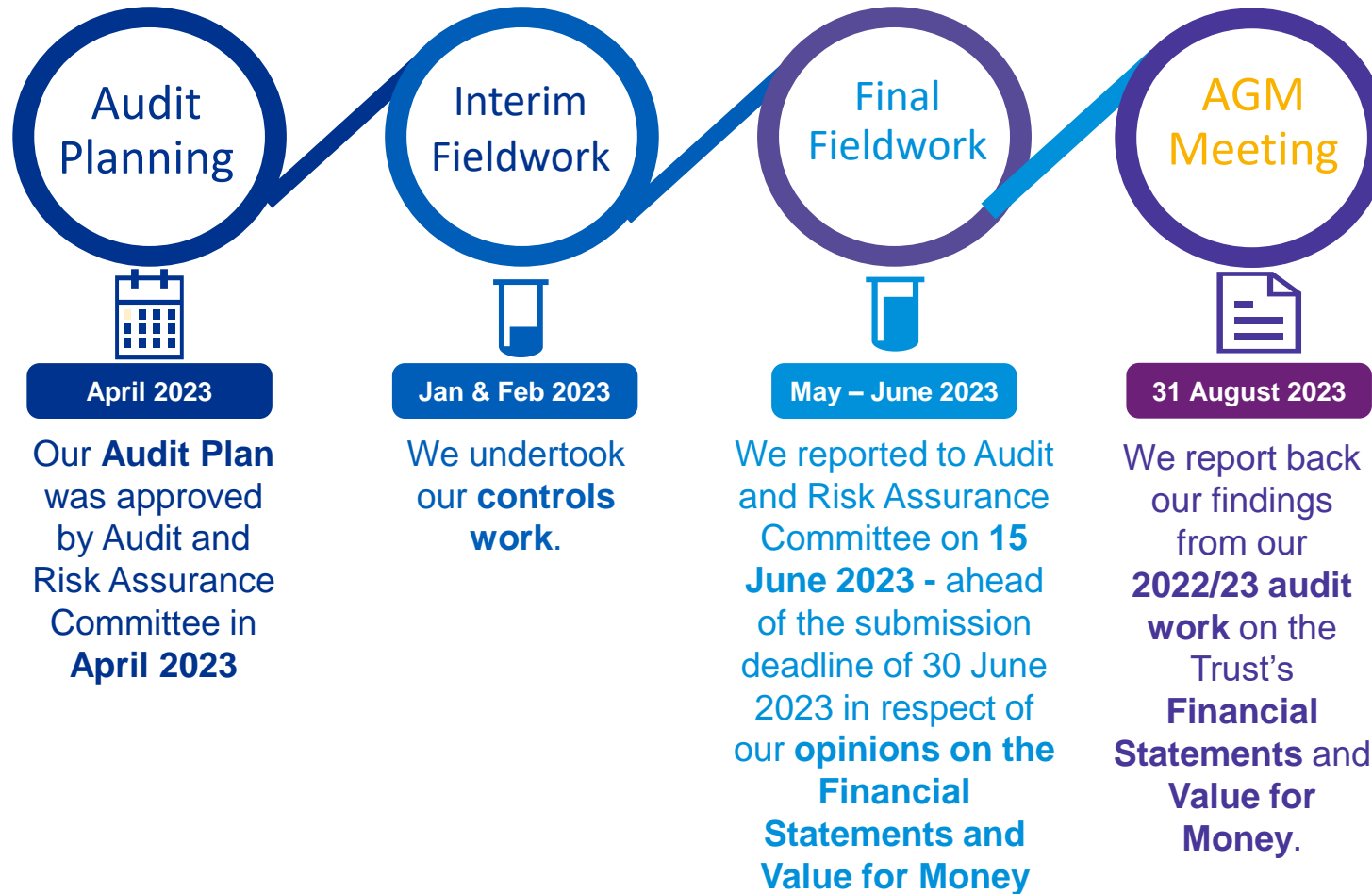


**Ryan Jackson**  
Assistant Manager

*"I am responsible for the on-site fieldwork. I complete work on the more complex sections of the audit"*

Specialist support received from relevant IT, valuations and tax colleagues as required.

# Audit timescale





# 1. Financial Statements

## Requirements

- *Do the financial statements give a true and fair view of the state of the Trust's financial affairs as at 31 March 2023 and its income and expenditure for the year?*
- *Have the financial statements been properly prepared in accordance with the accounting policies directed by the Secretary of State?*

We issued an **unqualified opinion**.



We audited your **2022/23 financial statements** and reviewed your **annual report**.



We reviewed the areas where there was a **high risk of error**, such as judgements and estimates.



We reviewed your **remuneration report** making sure payments made to the Board were supported by corroborating evidence.



We audited the **valuation of land and buildings**, by reviewing key assumptions made.



We reviewed the areas where management could **manipulate** the accounts.



Identified **3 misstatements** totalling £3.6m and **6 control deficiencies**

# 2. Value for Money

## Requirements

— *Has the Trust made proper arrangements for securing economy, efficiency and effectiveness in its use of resources?*

We issued an **unqualified conclusion** on the Trust's arrangements for securing economy, efficiency and effectiveness in its use of resources.



We reviewed the Trust's delivery of its **2022/23 plan** and **operating deficit of £47.2m** for the year ended 31 March 2023



The cash balance at year end was **£3.3m, which was c£13m lower than the prior year**. Since November 2022, the Trust has drawn support from NHSE under the Provider Revenue Support Scheme and this has been treated as Public Dividend Capital (PDC)



The total drawn down by the Trust as at **31 March 2023** was **£32.9m**. This has no set repayment date but attracts a dividend rate of 3.5%. **Additional £64m** required for the **2023/24**.



We took the work of other regulatory bodies into consideration. This included the Trust's response to its most recent **Ockenden Reports and CQC reviews**.



The Trust's **2023/24 financial plan** submitted in May 2023 and showed a **deficit of £45.5m within an overall system planned deficit of £60m**.



The Trust **delivered its forecasted 1.6% efficiency** in line with the national guidance.



**Any  
questions?**





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# Our quality and safety developments

**Dr John Jones**  
Executive Medical Director



# Improving care for our patients

We are here for our patients and delivering the best care possible remains our top priority

- 2022/23 has seen **significant pressures**, which have impacted our patients and their loved ones
- We are sorry that at times we have not been able to deliver the **high standards of care our teams strive for**
- We are proud of the way our teams have responded:
  - Doing everything possible, in the most difficult circumstances, to support **dignity and quality** in our Emergency Departments
  - Exploring every option to bring forward waiting times to support patients' mental and physical wellbeing
  - Supporting our patients, and one another, during ongoing **industrial action**
  - Embracing **new ways of working** to benefit patients and provide a more attractive offer for our colleagues



- Care Quality Commission ratings published 18 Nov 2021
- Seen a reduction in Section 31 conditions from 60 in 2021 prior to the inspection, to 5 at 31 March 2023
- We continue to work hard on embedding the improvements required so that all remaining conditions can be removed, but it remains an area of risk
- Improvements are overseen via our *Getting to Good* improvement plan

CQC domain	2017	2018	2020	2021
<b>Safe</b>	Requires improvement	Inadequate	Inadequate	Inadequate
<b>Effective</b>	Good	Requires improvement	Inadequate	Requires improvement
<b>Caring</b>	Good	Good	Requires improvement	Requires improvement
<b>Responsive</b>	Requires improvement	Requires improvement	Inadequate	Inadequate
<b>Well-led</b>	Requires improvement	Inadequate	Inadequate	Requires improvement
<b>OVERALL</b>	Requires improvement	Inadequate	Inadequate	Inadequate



# Our 8 Quality Priorities in 2022/23

Domain:	QUALITY PRIORITIES:	
SAFE	Priority 1:	Learning from Events and Developing a Safety Culture
	Priority 2:	The Deteriorating Patient
	Priority 3:	Inpatient Falls
EFFECTIVE	Priority 4:	Best clinical outcomes
	Priority 5:	Right care, right place, right time
PATIENT EXPERIENCE	Priority 6:	Learning from experience
	Priority 7:	Vulnerable patients
	Priority 8:	End of life care

Detailed within our Quality Account



# A focus on Learning from events and developing a safety culture (Priority 1)

## What we said we would do:

1. Standardise the process for safety huddles throughout our wards and departments - **achieved**
2. Continue improvements in the percentages of staff responding positively to the relevant safety culture elements included in the staff survey – **not achieved**
3. Continue to embed our Quality Governance Framework within the Divisions across the Trust - **achieved**
4. Implementation of the Patient Safety Incident Response Framework (PSIRF) in line with national guidance – **on target**

# A focus on Falls (Priority 3)

What we said we would do:

1. Establish an Enhanced Patient Supervision Team in 2022/23 and work undertaken to reduce de-conditioning for our patients – **achieved**
  2. Ensure other key members of our multi-disciplinary teams involved in the care of patients who are at risk of falls have received falls training (**ongoing**)
  3. Ensure all patients have a falls risk assessment completed on admission, a care plan and care after a fall adheres to our falls procedure and best practice – **achieved**
- Number of falls with harm: in March 2022, we had 5.45 falls per 1000 bed days; in March 2023 this had fallen to 4.05 falls per 1000 bed days

# Improvement areas of focus

## Other areas of focus in 2022/23 have included:

- Venous thromboembolism (VTE)
- Pressure ulcers
- Healthcare acquired infections
- Timely response to patient concerns and complaints
- Maternity care standards, in response to the Ockenden Report



# Involving patients and local communities

**We remain committed to ensuring the patient-public voice is at the centre of shaping our health services**

- Working closely with our **Healthwatch and Llais (Wales)** partners to respond to feedback from patients
- **Patient and Carer Experience (PaCE) Panel** working collaboratively towards quality improvement and patient experience
- **Specialty patient experience groups established** - reviewing feedback at a local level and identifying priorities for co-development
- **Public Assurance Forum** continues to work with us to ensure our decisions are developed in partnership with local communities
- Free **community membership** in place with over 3,600 members and 350 organisations (2022/23)
- **Engagement with local communities** on service changes, including Renal Dialysis, Audiology and ENT, breast screening
- **Social Inclusion Facilitator** worked with young people, ethnic minority groups, faith groups, substance misuse and armed forces veterans

**We want to build greater public confidence, trust and understanding by listening and being responsive to the needs of our local communities.**



# Our 9 Quality Priorities in 2023/24





# Our maternity developments

**Hayley Flavell**

Director of Nursing







# Our performance

**Sara Biffen**

Acting Chief Operating Officer



# Our performance

## 2022/23 saw:

- High demand for urgent and emergency care services
- Long A&E waits and ambulance delays
- Challenges maintaining flow and discharging patients with complex needs
- Managing the ongoing impact of COVID-19
- Recovery of elective and cancer services



# Urgent and emergency care

## Pressure on our urgent and emergency care services remained high throughout the year

- We were caring for high numbers of patients with COVID-19
- We were managing delays in discharging high numbers of patients who no longer needed to be in hospital
- This resulted in long patient waits in A&E and ambulance handover delays affecting our A&E performance against national standards





# Improving care for our patients

**To reduce waiting times for our patients and improve flow through our hospitals we:**

- Opened a new Acute Medical Floor at RSH in Dec 2022
- Expanded the discharge lounges on both hospital sites
- Created an Ambulance Receiving Area at RSH – joint working with West Midlands Ambulance Service
- Created an Ambulance Receiving Area at PRH
- Completed the expansion of A&E at RSH, including a dedicated area for children and young people
- Secured investment for a new 32-bed modular inpatient ward at RSH

**We are also working with our partners:**

- Multi Agency Discharge Events to improve discharges
- Virtual Ward – out of hospital care



# Elective and cancer services

**COVID-19 and pressures in urgent and emergency care impacted on the recovery of elective and cancer services.**

We:

- Prioritised patients by clinical urgency and those who have waited longest for the treatment
- Secured additional diagnostic support – mobile MRI and CT scanners
- Recommenced elective orthopaedic inpatient surgery at PRH
- Continued to work with partners to seek mutual aid

We are also receiving Tier 1 support from NHS England to help recover Referral to Treatment (RTT) and cancer standards.





# Reducing waiting times for our patients

## By year end we:

- Eradicated 104 week waits
- Reduced 78 week waits
- Put plans in place to reduce 65 week waits to national recovery standards by March 2024
- Reduced the number of patients waiting over 62 days for cancer treatment
- Cleared breast screening waits
- Improved CT and MRI waits
- Improved turnaround times for reporting of images



**Thank you to our dedicated teams for all they do to support our patients.**

# Looking forward

**We are focused on continuing to improving our performance so we can deliver high quality, safe care for our patients.**

This includes creating additional capacity, and delivering new models of care with our partners:

- £24 million Planned Care Hub at PRH
- The first Community Diagnostic Centre in Telford
- Off-site renal unit in Telford
- Sub-acute care and rehabilitation wards
- Hospitals Transformation Programme – longer term





# Our people

**Rhia Boyode**

Director of People and  
Organisational Development





# Trust Chair's Report

## Dr Catriona McMahon





# Questions and answers

## Dr Catriona McMahon



# Closing remarks

## Dr Catriona McMahon



# Thank you for attending

