



Welcome to the Annual General Meeting

25 September 2025









Welcome

Andrew Morgan Chair in Common







2024/25 Annual Report and Accounts



Agenda item	Name
Welcome	Andrew Morgan, Chair in Common
Review of the Year 2024/25 and Forward Look	Jo Williams, Chief Executive in Common and relevant directors
Financial Review 2024/25	Adam Winstanley, Acting Director of Finance
Our quality, safety and maternity developments	Dr John Jones, Executive Medical Director Kara Blackwell, Deputy Chief Nurse
Our future strategy and developments	Nigel Lee, Director of Strategy and Partnerships
Receiving the Annual Report and Accounts Question and answer session	Andrew Morgan, Chair in Common Andrew Morgan, Chair in Common/directors
Closing remarks	Andrew Morgan, Chair in Common









Review of 2024/25 and forward look

Jo Williams

Chief Executive in Common







Reflections on 2024/25

Progress

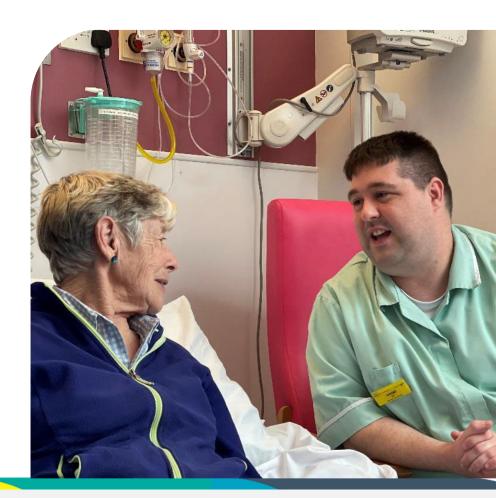
- Improving quality, safety and patient experience
- National approval for 'once in a generation' investment in services
- Digital transformation Electronic Patient Record
- **Performance** improving waiting times
- Setting strong foundations to financial recovery

Opportunities

- Strengthened collaborative working shared chair in common
- £17m investment in becoming **Greener** Trust
- Investment in diagnostic capacity and surgical efficiency

Challenges

- Urgent and emergency care
- Industrial action
- Balancing day-to-day with scale of transformation









Making a difference for our patients

Our teams continued to deliver tangible improvements in all aspects of patient care:

Work started on building modern healthcare facilities

£24million Planned Care Hub opened – 3,800 patients treated Community
Diagnostic Centre –
124,378 scans and
appointments

Cancer investment new £3.6million Gamma camera opened

Digital – Electronic Patient Record/first trust to implement electronic paediatric observations CQC reported progress – improved overall rating to 'requires improvement'

Capital investment including Planned Care Hub, modular wards, Linac bunker

New Energy Centre

Funding to replace RAAC and upgrade restaurant facilities

Progress on tackling health inequalities







Our people

- Cultural transformation improvement in 2024 staff survey indicators
- Focus on building a modern workforce right staff, right skills, right place
- Multi faith spiritual care team to support staff
- Celebration of rich diversity through events, conferences and staff networks
- Inclusive leadership programmes
- Successful apprenticeship scheme 73
- Mandatory training at 93%







Thank you to our colleagues for their commitment, dedication and compassion





Our priorities 2025/26



Quality and safety

Maternity transformation

Upgrading our digital tools

Improve urgent and emergency care

Reduce waiting times further for elective care

Improve access to cancer treatment

Improve diagnostic tests and reporting

Improve working lives of staff

Deliver value for taxpayers

Work with partners to improve the health and wellbeing of our communities

Work with partners to reduce health inequalities and focus on prevention

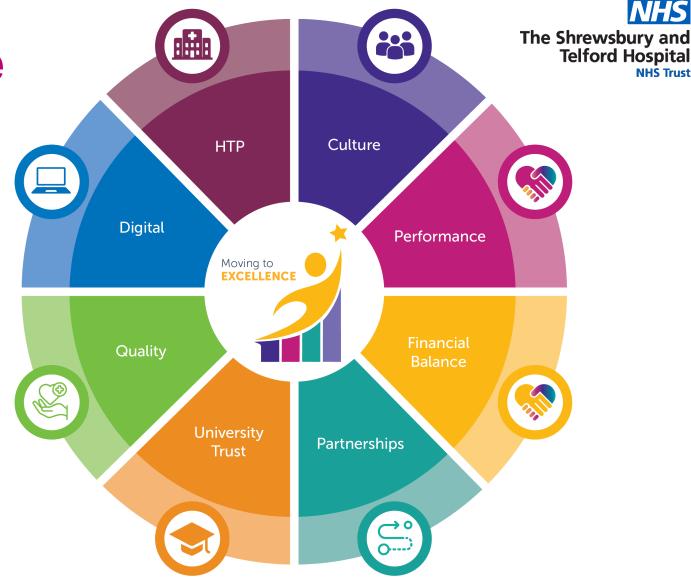




Moving to Excellence

In 2025/26, we aim to go further and faster in our transformation work to build a Trust where everyone is proud to receive care and work.

- Access to timely care
- Inclusive culture
- Digital transformation
- Restore financial balance
- Modern healthcare facilities
- Education, improvement and research becoming a university trust
- High quality, safe integrated care









Ongoing improvement of our services

2025/26

- Significant improvements in elective, diagnostic and cancer performance
 - Moved forward to 113 /134 in Q1 league tables
 - One of the most improved for planned care
 - Best diagnostic performance in five years
 - Improved cancer performance 62-day best in three years
 - UEC more to do but improved performance in 4 hour and ambulance handover times
- Digital transformation new patient portal
- Greener Trust new energy centre
- HTP phase two of expanded Emergency Department
- Group model partnerships









Two thriving hospitals

Our transformation plans to create two thriving hospitals were given the green light in 2024/25 – paving the way for work to start on new healthcare facilities to **improve care for everyone**.

- Construction of the new four storey healthcare facilities began at RSH. Plan to open in 2028.
- Planned Care Hub opened at PRH
- Phase 1 and 2 expansion of Emergency Department at RSH now open
- New cancer and respiratory centres planned for PRH working with charities
- Ongoing engagement with our communities and staff









We are forming a Group model with ShropCom:

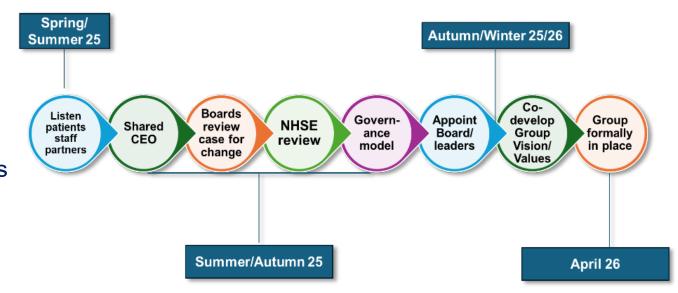
- Remain as two statutory (legal) trusts
- Shared leadership/governance
- Equal partners building on areas of excellence

Benefits:

- Deliver three shifts in 10-year plan
- Share capacity, experience and resources
- Improve pathways and services to benefit patients
- Deliver value for money
- Release and attract investment
- Improve communications
- Support our staff

Case for Change: informed by feedback

Our Aim: making things better, not just different











Financial review 2024/25

Adam Winstanley
Acting Director of Finance







Financial performance 2024/25

Revenue in-year:

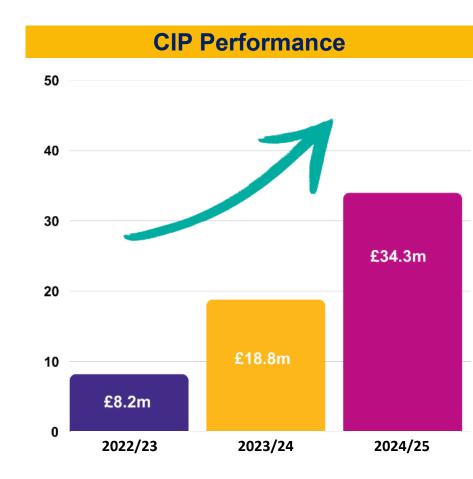
- Breakeven plan supported by £44.3m deficit support funding; actual outturn £24.4m
- Delivery (excluding exceptional item) in-line with revised forecast formally reported and agreed with NHSE at month 11
- Deficit driven by temporary staffing premiums, pay award pressure and endoscopy income

Revenue underlying plan:

Deficit plan of £47.4m

Capital expenditure:

- £69.2m total expenditure, in line with plan £16.8m internally generated funds; £52.4m centrally funded public dividend capital
- £8.1m Public Sector Decarbonisation Scheme grant









Financial planning 2025/26

We are making progress on our journey towards financial balance.

- Agreed breakeven revenue plan underpinned by £45.1m deficit support funding
- Cost Improvement Programme: £41.4m
 - £29.9m Recurrent
 - £11.5m Non-Recurrent
- Underlying deficit: £46.5m
- Capital plan: £140.7m
 - Operational £22.5m
 - Estates Safety £6.8m
 - Constitutional standards £4.0m
 - Centrally funded public dividend £107.4m (HTP/RAAC)











Dr John Jones Executive Medical Director

Kara Blackwell **Deputy Chief Nursing Officer**









Our quality improvements 2024/25

- Improved care of deteriorating patients through introduction of electronic alert systems with particular focus in paediatrics and emergency medicine
- Fully embedded new safety processes so that we learn better from when things go wrong (PSIRF)
- Improved initial assessment in emergency departments to ensure patients are reviewed in the most appropriate area with the right priority
- Reduced delays experienced by patients in ambulances
- Introduction of same day major orthopaedic surgery
- Preventing deconditioning for frail patients by focus on rapid return normal mobility
- Reduction in time waiting for diabetic foot assessment
- Widening and expanding use of virtual ward including intravenous antibiotics in the community











Patient Safety	1	Improve how we look into things that go wrong. Using our national reporting tool (Patient Safety Incident Response Framework (PSIRF)	Clinical 4 Effectiveness	 Improve the experience in planned care (elective care): Reduce waiting times for radiology Reduce delays in radiology reports (results)
		This will:Reduce the risks of a patient getting worse in hospital (deteriorating)	5	Improve the patient experience in emergency care
		 Reduce the risk of falls for hospital patients Give patients the right medicines, on time Deliver faster reporting (results) in radiology 	6	Work with partners to have earlier conversations and plans ready to help patients leave hospital, when they no longer need hospital care Involve patients in planning for what happens after hospital care
	2	Reduce the number of patients who get bed sores (pressure ulcers) during their hospital stay	7	Improve foot care for patients with diabetes who are on our hospital wards
	3	Patients have nutritional assessments and nutritional care planning in place	8	Give patients who are very unwell the best outcomes, reducing the risk of avoidable death (mortality)

Patient Experience

9

Improve the experience of patients and their loved ones who have a learning disability and/or autism







A focus on Maternity and Neonatal

Maternity

- Delivery of safe, effective and reliable maternity services building on CQC Good rating
- Completion of all our actions from Independent Review of Maternity Services led by Donna Ockenden
- Focus on meaningful engagement with families affected by review
- National maternity and neonatal investigation announced in September 2025, 14 Trusts included. SaTH is one of the three trusts chosen where previous investigations have taken place and learning from these will be incorporated in this new investigation
- To continue to meet the safety criteria for the maternity incentive scheme (Clinical Negligence Scheme)
- Continue to deliver 'Saving Babies Lives Care Bundle'

Neonatal

- Invited review of neonatology service. Good progress being made
- Two new consultant appointments
- Strengthened leadership across all disciplines and improved recruitment









Involving our patients and communities

We are committed to involving our communities:

- Public Assurance Forum
- Public focus groups to support service changes and improvement and About Health Events
- Over 5,300 community members and over 470 organisations
- Attended over 291 community events and meetings
- SaTH Charity raised over £500k
- Worked with League of Friends and Lingen Davies to fund improvements for urology and cancer services
- Over 200 volunteers who contribute over 2,500 hours monthly
- Introduced new volunteer discharge driver role
- Volunteer to Career programme











Our future strategy and developments

Nigel Lee

Director of Strategy and Partnerships & Chief Strategy Officer, NHS Shropshire Telford & Wrekin Integrated Care Board







Progress on our Trust Strategy

- Great place to work
- Improving quality
- Better patient journey
- Patient pathways
- Sustainability
- Wider health and wellbeing
- Digital investments
- Acute services configuration progress in HTP









Next steps for our Trust Strategy



- NHS 10 Year plan launched July 2025
- Focus on three shifts
 - Hospital to Community
 - Analogue to Digital
 - Sickness to Prevention
- SaTH will play key role in all three shifts
- Enabled by new NHS operating model, workforce transformation, productivity, technology
- Underpinned by delivery of our plans now







Our future priorities

Priority	Outcome	
Hospital to community: Neighbourhood health programme	Care delivered locally, reducing pressure on hospitals Neighbourhood health service, neighbourhood health hubs	
Hospitals Transformation Programme	Modern acute facilities with sustainable ways of working	
Analogue to Digital: digital programme	Digital tools and data access for patients and staff. NHS App as "front door". Cutting-edge tech boosting efficiency and outcomes	
Sickness to prevention	Early support and promoting healthy lifestyles	
Workforce and leadership: Joint People strategy	Better place to work, everyone feels they belong and has a voice Empowered local leaders and diverse recruitment.	









Receiving 2024/25 Annual Report and Accounts

Questions and Answers

Andrew Morgan, Chair in Common, and other directors









Thank you for your attendance



