



**Welcome to our
Annual Members Meeting
2018-19**

Programme

- 4:00pm **Welcome**, Steve McGuirk, Chairman
- 4:05pm **Annual Report 2018-19**
Chief Executive's Report – Mel Pickup, Chief Executive
Quality & Operational Report – Prof Simon Constable, Executive Medical Director, Kimberley Salmon-Jamieson, Chief Nurse; Dan Moore, Deputy Chief Operating Officer
Financial Review - Andrea McGee, Director of Finance & Commercial Development
- 4:50pm **Break (cream tea)**
- 5.05pm **Lead Governors' Report** Mr Norman Holding, Public Governor
- 5.20pm **Forward plan 2019-20**, Mel Pickup, Chief Executive
- 5:50pm **Q&A session**
- 6.00pm **Close**



Chief Executive's Report For 2018-19



- ✓ A year working on 'Getting to Good'
- ✓ A year of Quality, Safety & Performance
- ✓ A year working with our partners
- ✓ A year of Innovation
- ✓ A year to be proud of for #TeamWHH

**We started with major
challenges...**

29th March 2019 at 2:30pm



News

29th November 2017

Warrington Hospital ordered to improve by the Care Quality Commission for second time in three years

Our ratings for Warrington and Halton Hospitals NHS Foundation Trust

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|---------|----------------------|----------------------|--------|----------------------|----------------------|----------------------|
| Overall | Requires improvement | Requires improvement | Good | Requires improvement | Requires improvement | Requires improvement |

**We focused on improving
quality and safety of care
and performance**

Our Journey began with a new strategy

We will be outstanding for our patients, our communities and each other

Our Mission, Vision, Values Aims and Objectives

Our Mission: We will be **OUTSTANDING** for our patients, our communities and each other.

Our Vision: We will be the change we want to see in the world of health and social care.

Quality: We will... Always put our patients first through high quality, safe care and an excellent patient experience.

People: We will... Be the best place to work with a diverse, engaged workforce that is fit for the future.

Sustainability: We will... Work in partnership to design and provide high quality, financially sustainable services.

We are WHH & We are PROUD to make a difference

Our Aims/Objectives: Continuously improving, exploring new opportunities and technology and being creative and innovative in redesigning and developing all we do.

We will Do this by: Working Together, Excellence, Accountability, Risk, Market, Enabling Change.

Our Values: Working Together, Excellence, Accountability, Risk, Market, Enabling Change.

We are WHH Clinical Strategy 2018-2023

NHS Warrington and Halton Hospitals NHS Foundation Trust

We are WHH

We are WHH Our Strategy 2018-2023

NHS Warrington and Halton Hospitals NHS Foundation Trust

Our mission is to be OUTSTANDING for our patients, our communities and each other.

We commenced a Quality Improvement journey and launched a quality academy – a vehicle for Quality Improvement, Innovation and Research



Quality Academy
Warrington and
Halton Hospitals
NHS Foundation Trust



Quality Improvement
Warrington and
Halton Hospitals
NHS Foundation Trust

Quality Investment

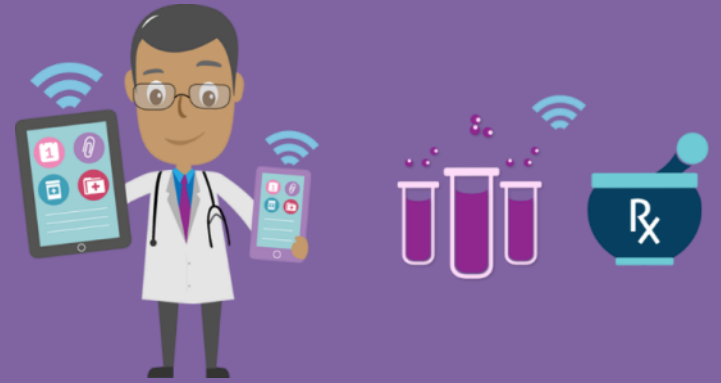
As a Board we elected to invest in quality initiatives in 2018-19, requiring further negotiation with regulator to adjust control total.

£9m investment in year

| | |
|-----------|-------------------------------------------------------------|
| £3million | Increasing our core nursing/HCA establishment |
| £700K | Conversion of A3 to CCU and Cardiology |
| £700K | AER machines for Endoscopy |
| £600K | Upgrade to electrical infrastructure |
| £530K | Therapies |
| £500K | IT technology refresh |
| £451K | MRI Scanner managed service |
| £499K | Pharmacy (over two years) |
| £400K | Replacement back up generators |
| £400K | Investment in fire prevention measures |
| £400K | IT Security and Desktop Infrastructure |
| £300K | ICU ventilators |
| £300K | Electronic Prescribing |
| £200K | Discharge Suite and Relocation/Upgrade of Bereavement Suite |

We invested in technology

- ✓ **ePMA** –electronic prescribing in Halton and CMTC
- ✓ **Lorenzo Digital Exemplars Programme**
- one of four in country
- ✓ **Launched a new two-way appointment text reminder service and combined FFT**
 - DNAs reduced from 13% to 8%
 - FFT response AND ratings increased.



We improved our estate and opened new services

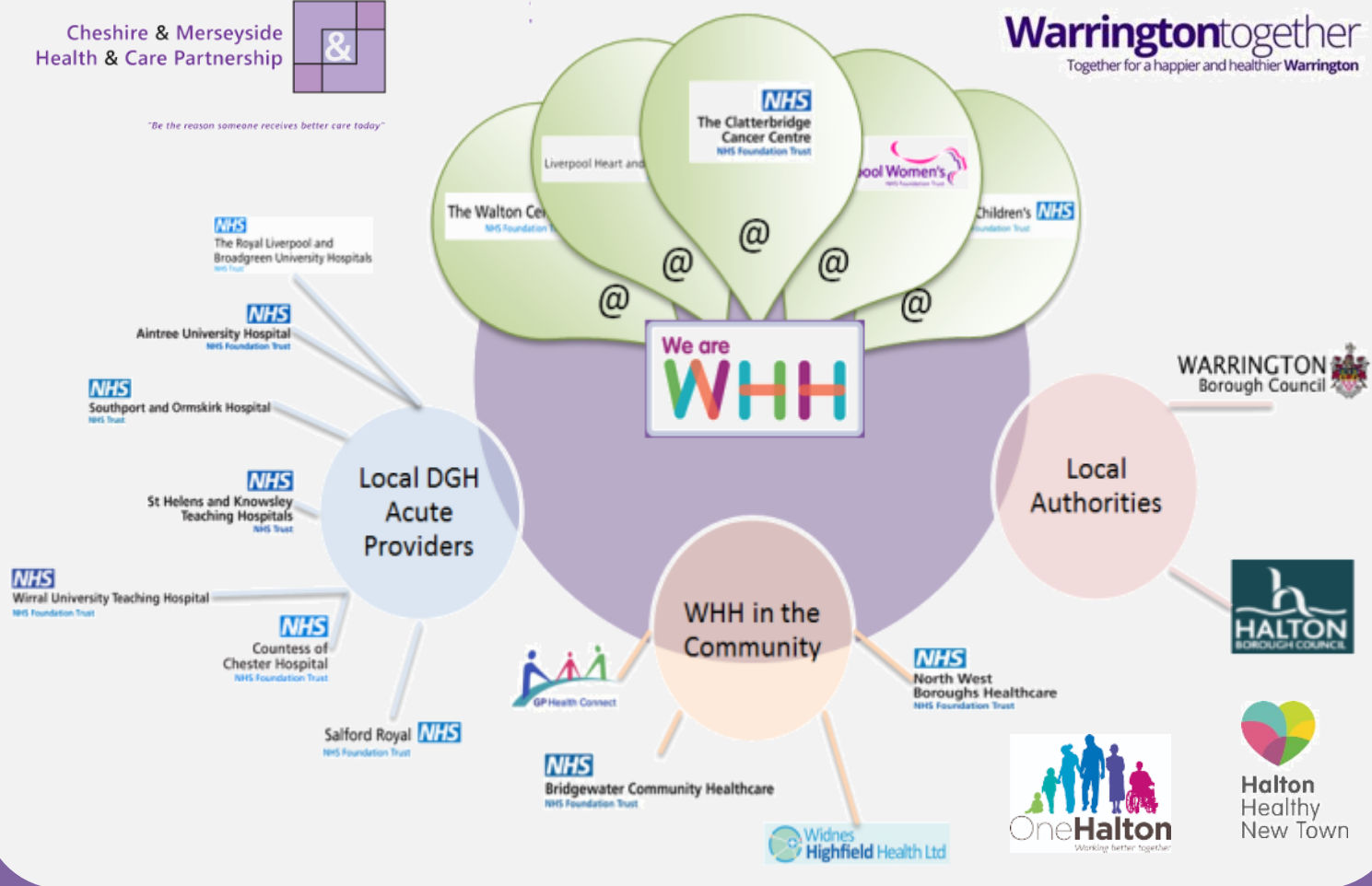


New Acute Cardiac Care Unit and Discharge Lounge

**We worked in partnership with
others to achieve our goals**



"Be the reason someone receives better care today"



We Worked with others across both Halton and Warrington Boroughs and Beyond...



*Frailty Unit & Pathway
with Warrington
Together*



We worked with others across both Halton and Warrington boroughs and beyond...



Warrington Disability Partnership opened a unit within our orthopaedic clinic

Work continued on the new Hospital and Wellbeing Campus as part of the Halton Healthy New Town



We started collaborating with Bridgewater Community
Healthcare NHS FT



Our partnership with social enterprise reaped huge rewards





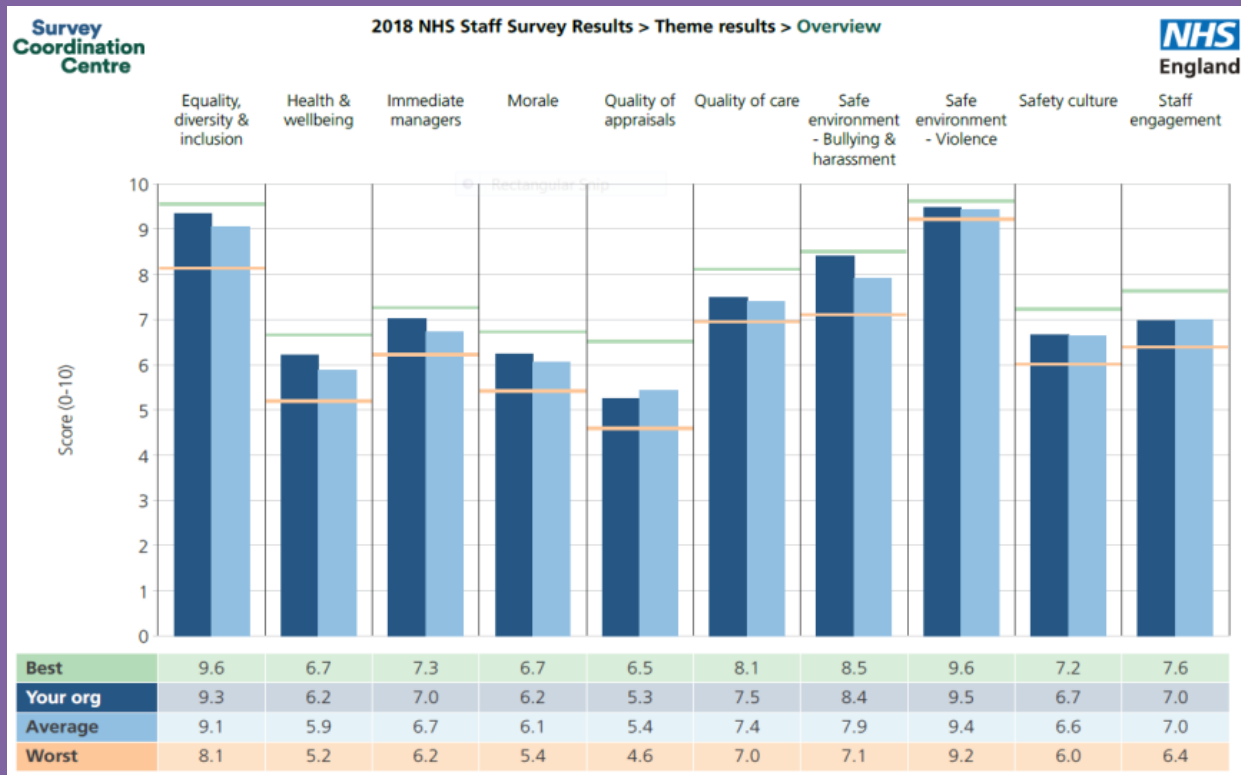
WHH Charity raised £185K in the year and funded £199K worth of projects in the year (and picked up some great gifts on the way!

Twins Ruben and Elena ran 100km in the year to raise >£15K for the new outdoor play area and Tesla distributor gave us a mini Tesla for our children to 'drive' themselves to theatre.



Our Amazing, innovative
#TeamWHH

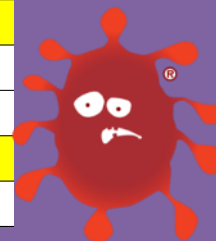
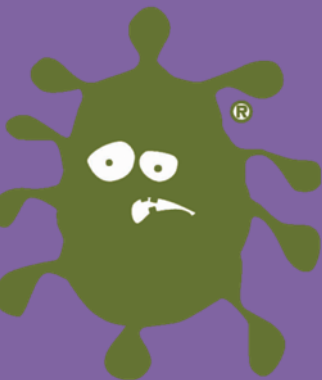
NHS Staff Survey 2018



- ✓ 51% response rate (national average 46%)
- ✓ Improvement in 9/10 indicators
- ✓ Pushing towards 'best in class' in:
 - Immediate line management
 - Safe environment/low bullying harassment
 - Safe from violence
 - Equality/Diversity/Inclusion

We were a top 5 FLU Fighter

| | | | |
|---------------------------------------------------------------|-------|-------|------|
| AINTREE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST | 3,106 | 2,542 | 81.8 |
| CHESTERFIELD ROYAL HOSPITAL NHS FOUNDATION TRUST | 3,307 | 2,850 | 86.2 |
| COUNTESS OF CHESTER HOSPITAL NHS FOUNDATION TRUST | 3,413 | 2,766 | 81.0 |
| EAST LANCASHIRE HOSPITALS NHS TRUST | 7,186 | 6,384 | 88.8 |
| HULL AND EAST YORKSHIRE HOSPITALS NHS TRUST | 6,464 | 5,348 | 82.7 |
| NORFOLK AND NORWICH UNIVERSITY HOSPITALS NHS FOUNDATION TRUST | 7,000 | 5,790 | 82.7 |
| POOLE HOSPITAL NHS FOUNDATION TRUST | 3,668 | 3,115 | 84.9 |
| ROTHERHAM, DONCASTER AND SOUTH HUMBER NHS FOUNDATION TRUST | 2,893 | 2,525 | 87.3 |
| SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST | 4,512 | 3,687 | 81.7 |
| SHERWOOD FOREST HOSPITALS NHS FOUNDATION TRUST | 4,109 | 3,305 | 80.4 |
| SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST | 1,825 | 1,483 | 81.3 |
| ST HELENS AND KNOWSLEY HOSPITALS NHS TRUST | 3,637 | 3,275 | 90.0 |
| UNITED LINCOLNSHIRE HOSPITALS NHS TRUST | 5,543 | 4,653 | 83.9 |
| UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS FOUNDATION TRUST | 4,878 | 4,030 | 82.6 |
| WARRINGTON AND HALTON HOSPITALS NHS FOUNDATION TRUST | 2,466 | 2,111 | 85.6 |
| WIRRAL UNIVERSITY TEACHING HOSPITAL NHS FOUNDATION TRUST | 5,230 | 4,379 | 83.7 |



We joined Listening into Action

- LIA's best ever response rate to the PULSE survey with 73%
- 'Pass It On' event - 11 pioneering teams completed
- Cohort 2 underway



Awards galore!

HSJ AWARDS
2018 WINNER

Primary Care Innovation

PATIENT SAFETY AWARDS
2018 FINALIST


THE BUTTERFLY AWARDS

2018 WINNER

Nursing Times
Workforce Summit & Awards

FINALIST

HFMA
AWARDS 2018

FINALIST

Director of Finance of Year

Nursing Times Awards 2018

FINALIST

Emergency and Critical Care
and
Patient Safety Improvement



JAG

Joint Advisory Group
on GI Endoscopy

Accreditation

EXCEL18
EXCELLENCE IN HRM
AWARDS 2018



Quality and Operational Performance

Prof Simon Constable, Deputy CEO & Executive Medical Director
Kimberley Salmon-Jamieson, Chief Nurse
Dan Moore, Deputy Chief Operating Officer

Key Quality Metrics

Infection Control

- C. difficile 27 cases, threshold 26
- MRSA bacteraemia 2 cases, threshold 0

Falls

- Reduction of inpatient falls from 58 to 50
- Joined the NHS Improvement collaboration on Falls

WHH Quality Priorities

Clinical Effectiveness



Diagnostics
Review policies and roll out training



Ward Accreditation
To engage staff and empower leadership



Discharge
Improve the quality and timeliness of discharge summaries

Patient Safety



Safer Surgery
Ensure that the Trust fully embraces the culture of safer surgery in theatres and in those areas that undertake invasive procedures



E-Prescribing
Improving patient safety by decreasing prescribing errors and saving time and resource



Reporting
Ensure we don't miss opportunity to learn from mistakes and make changes to protect patients from harm

Patient Experience



Child friendly
Making adult areas within the hospital more children friendly to increase the overall experience for patients/relatives/public

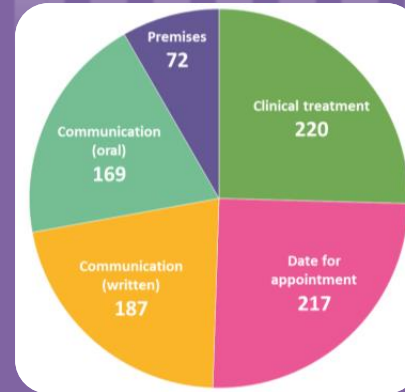
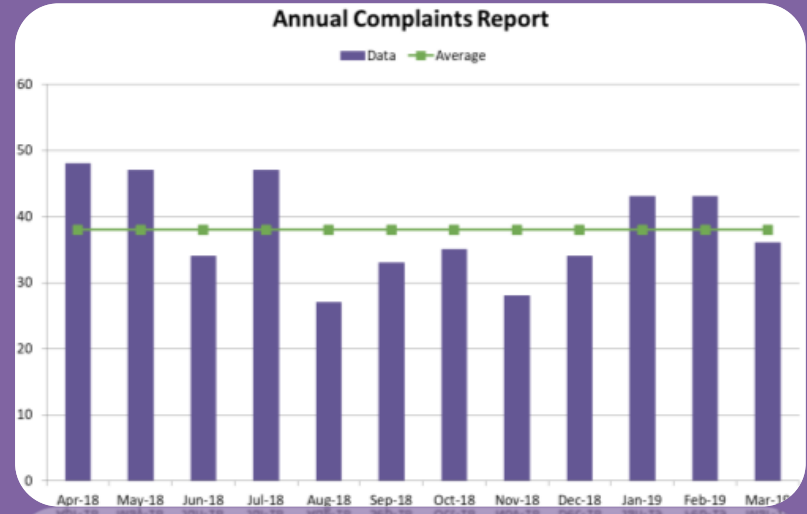
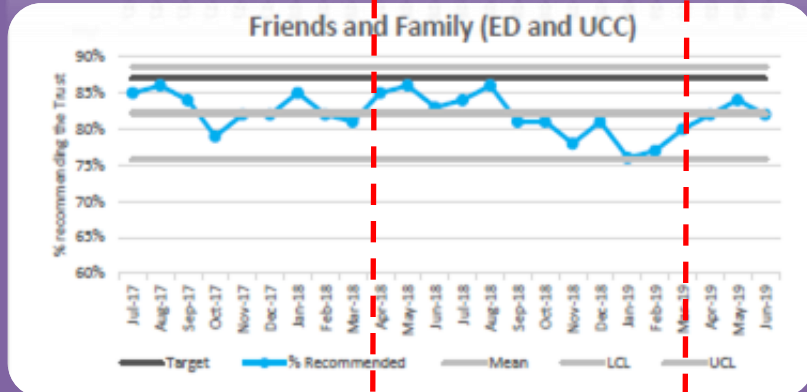
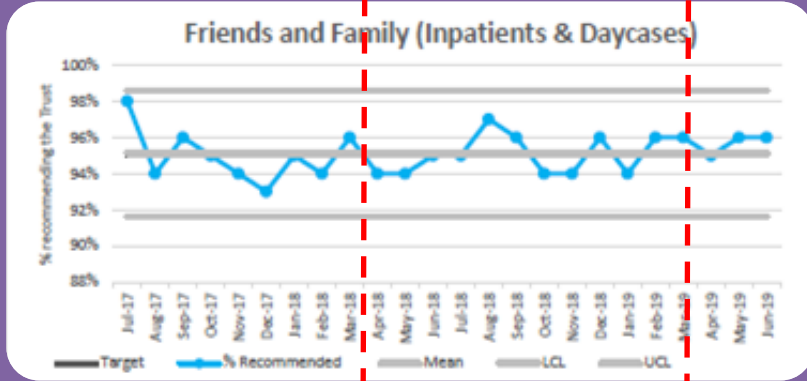


Rapid Discharge Process
Improve the Rapid Discharge Process for End of Life Care patients



Bereavement Service
Ensure that Bereavement Services are equipped to provide a caring and compassionate service, offering support and reassurance, information and guidance

Patient Experience



- Complaints handling
- NO complaints >6months
 - No cases in backlog

Nursing/Allied Health Professionals

Workforce diversity and innovation

- ✓ £3million investment in nursing care
- ✓ 86 new staff nurses in post up until 31st March 2019
- ✓ 8 consultant nurse roles
- ✓ Advanced Clinical Practitioners - 8 qualified, 25 trainees
- ✓ 35 Advanced Nursing Practitioners
- ✓ 8 qualified nurse associates, 5 trainees



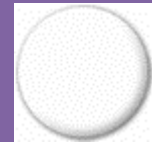
Gold – Excellent – Achieving highest standards with evidence in data



Silver – Very Good – Achieving above minimum standards with evidence of improvement in relevant data



Bronze – Good – Achieving minimum standards with evidence of active improvement work



White – Not meeting minimum standards in at least one category and no evidence of current improvement work



We launched our Ward Accreditation Scheme

First in Country
to launch the
new National
Early Warning
Score (NEWS2)



Continued suspension of Spinal Services

- Suspension continued throughout year
- Significant look-back exercise
- Underpinned by RCS Invited Review (2017)

- Our surgeons working with RLBUHT
- Now working with partners in Cheshire and Merseyside about the future provision of spinal services for the region



Key Quality Metrics

Mortality

- Both HSMR and SHMI remain 'within expected' range
- First full year of *Learning from Deaths* policy – investment in doctors trained in Structured Judgement Reviews
- The new Ward Round Accreditation initiative will review the quality of documentation as part of broader operational and educational improvement

VTE (blood clot risk assessment and preventative treatment)

- Continuously achieved over 95% compliance

Safer Surgery

- Maintained 100% compliance levels for the WHO checklist
- Conducts 60 observational audits per month

A Safety-focussed Culture



Patient Safety Daily Safety Briefing



Medical workforce diversity and innovation

Significant investment in new medical roles to ensure an effective modern workforce to retain and attract staff including:

- ✓ 24 new consultants appointed since April 2018 including hard to fill roles
- ✓ 12 qualified Physician Associates, 8 second year
- ✓ Associate Clinical Directors
- ✓ Chief Registrar (now two!)
- ✓ Roles with Quality Improvement Fellowships attached
- ✓ *6 international training posts Learn, Earn, Return scheme with KEM*



Operational Performance

Dan Moore, Deputy Chief Operating Officer

Key Operational metrics

A&E Attendances increased by 0.4% to 135K, Non-elective admissions decreased by 5%

| National Indicators | | Target | Apr | May | Jun | Qtr1 | Jul | Aug | Sep | Qtr2 | Oct | Nov | Dec | Qtr3 | Jan | Feb | Mar | Qtr4 | YTD Position |
|-----------------------------------------|-------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------------|
| A&E & MIU (Including Widnes Walk-in) | % Departed <=4hrs | >=95% | 86.73% | 90.91% | 90.98% | 89.60% | 90.46% | 87.55% | 84.85% | 87.73% | 84.71% | 83.22% | 80.06% | 82.72% | 78.22% | 79.45% | 82.37% | 80.03% | 85.11% |
| | * Number of attendances | | 11224 | 12096 | 11857 | 35177 | 12028 | 11004 | 10759 | 33791 | 11436 | 10869 | 10679 | 32984 | 11248 | 10383 | 11359 | 32990 | 134942 |
| | * Number of patients breaching 4hrs | | 1489 | 1100 | 1070 | 3659 | 1147 | 1370 | 1630 | 4147 | 1748 | 1824 | 2129 | 5701 | 2450 | 2134 | 2003 | 6587 | 20094 |

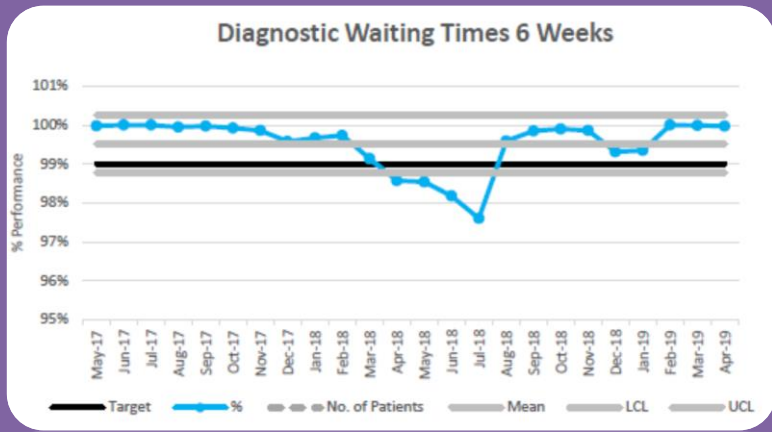
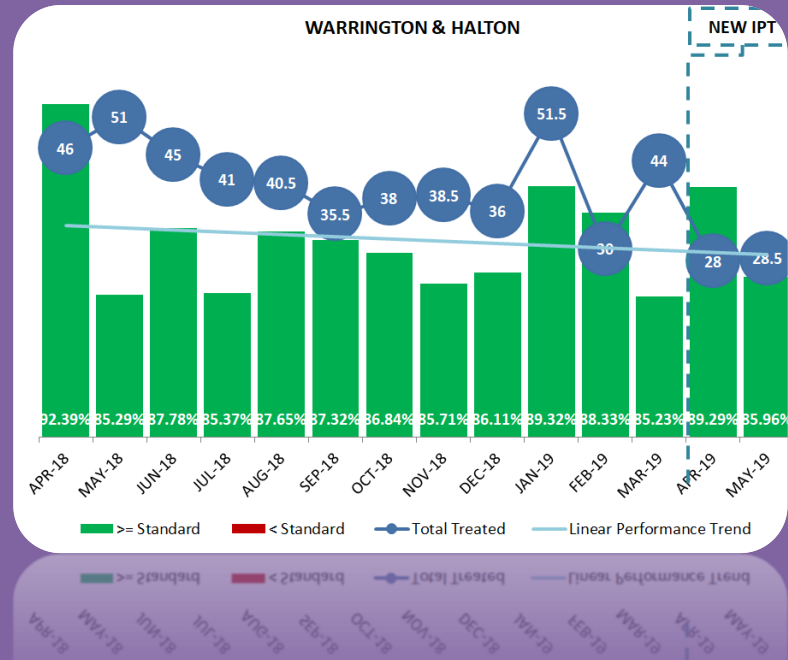
Referral to Treatment (RTT) We achieved the 18 week referral to treatment target consistently throughout the year against a target of 92%; this is difficult and challenging but supports care being delivered in a timely manner

| National Indicators | | Target | Apr | May | Jun | Qtr1 | Jul | Aug | Sep | Qtr2 | Oct | Nov | Dec | Qtr3 | Jan | Feb | Mar | Qtr4 | YTD Position |
|---------------------|----------------------------------------|--------|--------|--------|--------|------|--------|--------|--------|------|--------|--------|--------|------|--------|--------|--------|------|--------------|
| RTT - 18 Weeks | Incomplete Pathways % <18 Weeks | >=90% | 92.18% | 92.38% | 92.13% | | 92.37% | 92.27% | 92.60% | | 93.14% | 92.86% | 92.31% | | 92.60% | 92.51% | 92.45% | | |
| | * Number of incomplete pathways | | 18384 | 18325 | 17883 | | 18942 | 19110 | 18992 | | 18853 | 18923 | 18702 | | 18276 | 19022 | 18965 | | |
| | * Number of patients waiting 18+ weeks | | 1437 | 1397 | 1407 | | 1445 | 1478 | 1406 | | 1293 | 1351 | 1438 | | 1352 | 1424 | 1432 | | |
| | * Number of patients waiting 52+ weeks | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | | 0 | 0 | 0 | | 0 | 0 | 0 | | |

Cancer waiting times

- Strong, sustained performance, bucking the national trend

Diagnostics



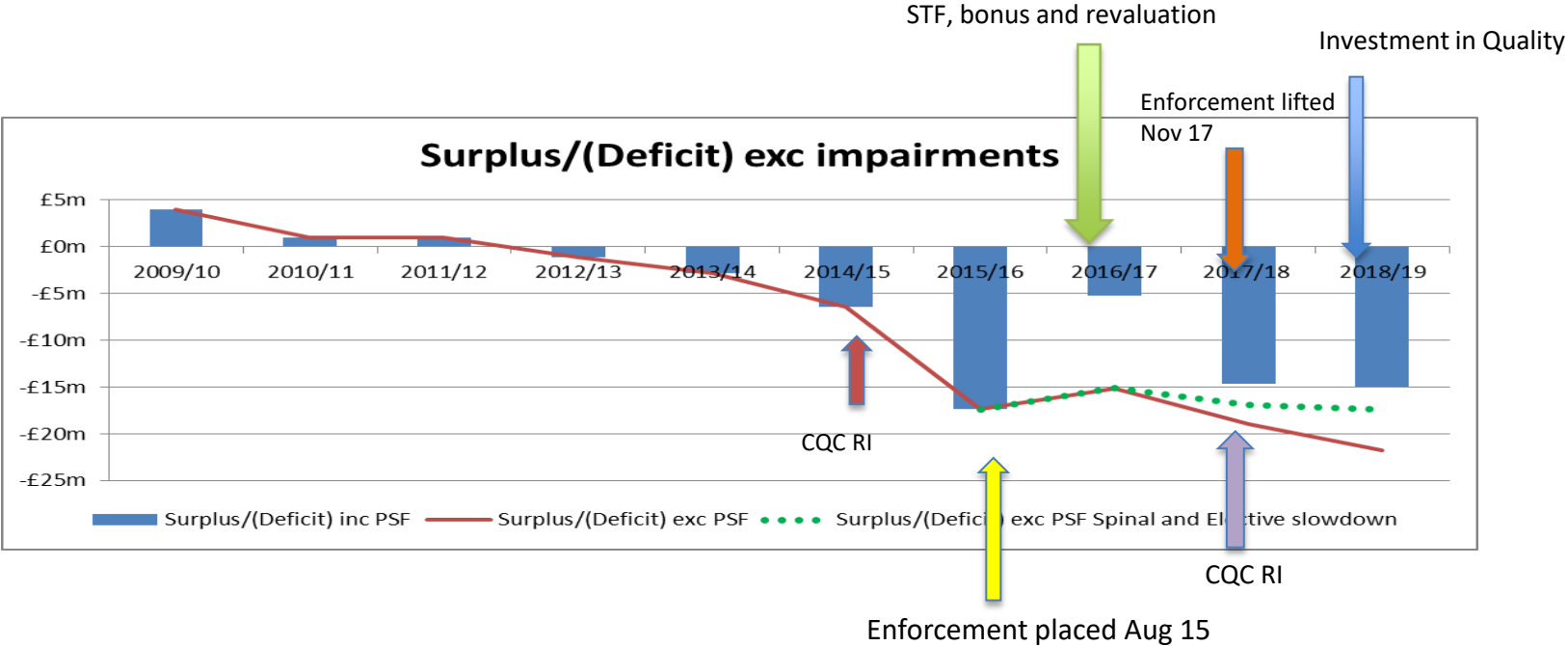
Improved performance against the target of less than 1% of patients waiting more than 6 weeks for a diagnostic test. From quarter 2, we continued to meet the performance standard every month.



Financial Review and Audit Report

Andrea McGee, Director of Finance and Commercial Development

Our Financial Journey

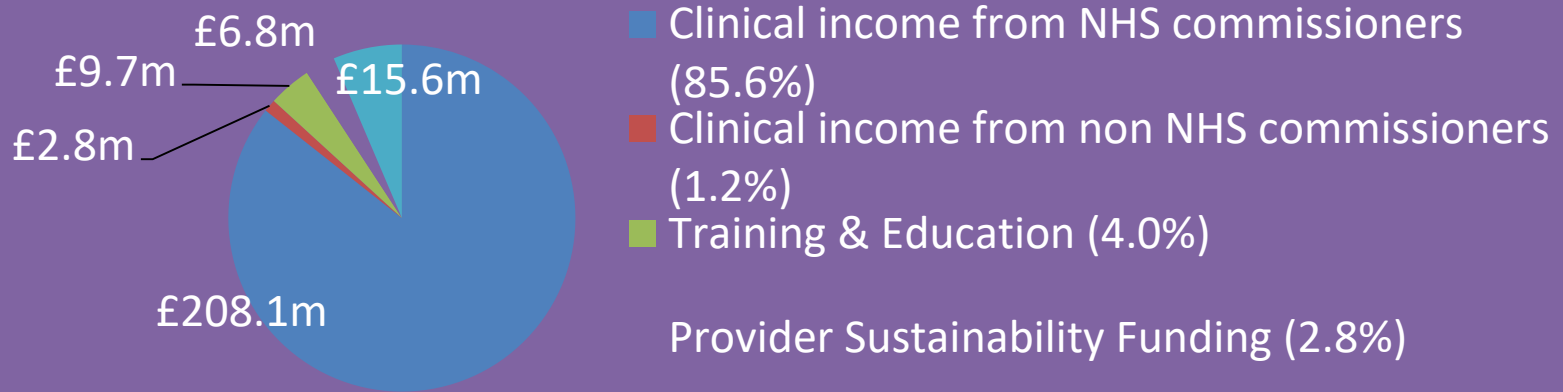


We achieved our £control total

- The Trust Control Total was £16.9m deficit
- Delivered operating deficit of £14.9m excluding exceptional items
- Delivered efficiency savings of £5.6m
- Received £3.5m core and £3.3m bonus Provider Sustainability Funding
- Exceptional items relate to an impairment charge on fixed assets following an asset revaluation exercise

| Narrative | Budget £m | Actual £m | Variance £m |
|-------------------------------------|----------------------|----------------------|------------------------|
| Operating Income | 245.6 | 243.2 | -2.4 |
| Operating Expenditure | -259.7 | -256.4 | 3.3 |
| Finance Costs | -2.9 | -2.8 | 0.1 |
| Deficit including exceptional items | -17.0 | -16.0 | 1.0 |
| Exceptional Items | 0.0 | 1.1 | 1.1 |
| Deficit excluding exceptional items | -17.0 | -14.9 | 2.1 |

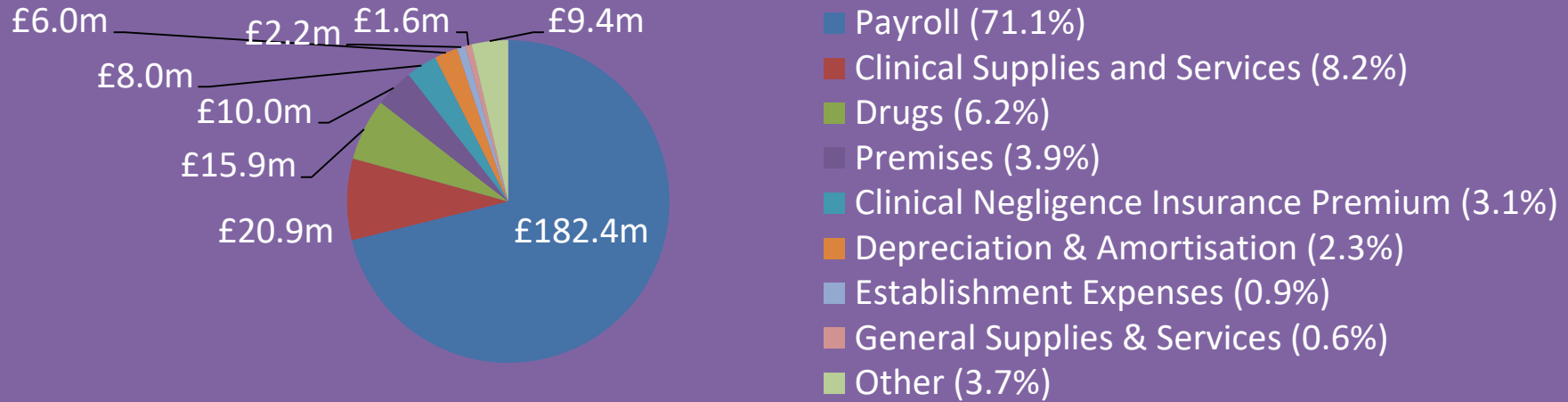
Where did the money come from?



A few facts....

- Total income generated by the Trust is £243.2m
- Main source of income is clinical £208.1m (85.6%) & main commissioners are Warrington CCG, Halton CCG, St Helens CCG and NHS England
- Main source of non clinical income is education and training at £9.7m from Health Education England
- Non clinical income also includes income related to staff recharges, clinical tests, catering, estates recharges, lease income and several other services

What the money was spent on

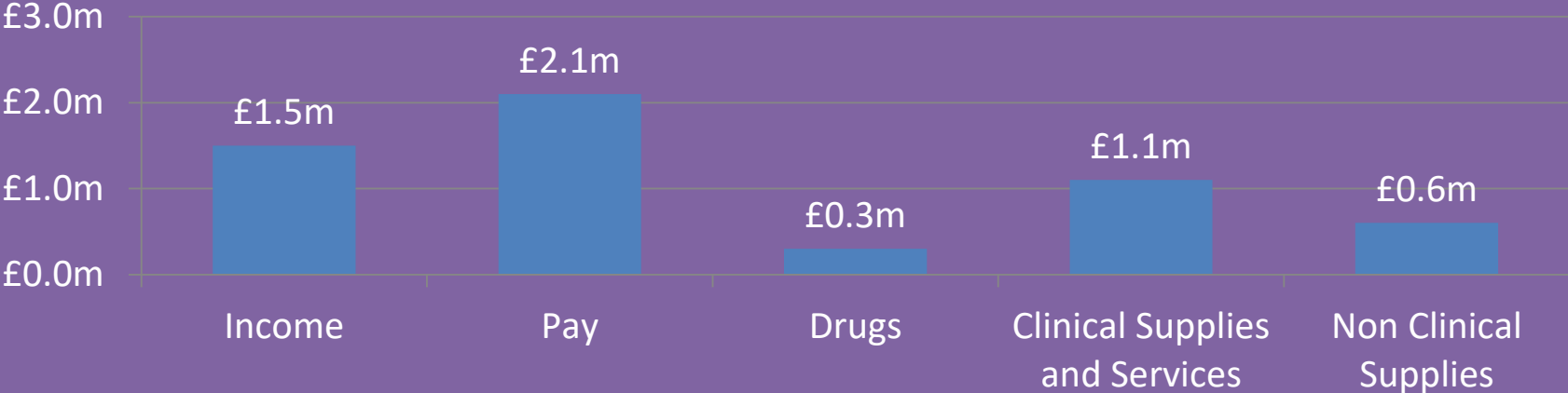


A few facts....

- Total operating expenditure £256.4m
- Largest area of expenditure is payroll £182.4m (71.1%)
- The trust employed an average number of employees equivalent to 3,898 staff (including bank and agency), with clinical and support staff accounting for 2,741 (71%) and non clinical staff 1,157 (29%)

Cost savings

The Trust delivered efficiency savings of £5.6m as summarised below, a number of initiatives were delivered including:-



Income – SLA and Fire

Pay- Theatres, Therapies and Corporate vacancies

Drugs - Biosimiliars

CSS – Prostheses, gas, reduced costs products and contracts

Non Clinical Supplies - CNST

Capital Investments

We have made significant financial investment since CQC inspection in areas where we needed to improve.

The Trust invested £7.2m in capital assets to improve the services and environment for patients, visitors and staff as summarised:

| Investment | £m |
|------------------------------------------|------------|
| Medical Equipment | 1.2 |
| Information Technology | 1.0 |
| Site Improvements | 1.3 |
| Health & Safety / Legislative Compliance | 1.6 |
| Kendrick Wing Fire | 2.1 |
| Total | 7.2 |

Capital Investments

We spent £1.2m on medical equipment, including:

- ICU Ventilators
- Ultrasound Machines
- Neo Natal Monitors
- Bladder Scanner
- Techotherm Cooling Blanket
- Sleep Study Units
- Spectrophotometer
- Anaerobic Cabinet
- Video Laryngoscope
- Defibrillators
- Mobile X Ray Detector
- Otology Drill



Anaerobic Cabinet



ICU Ventilator and Monitor



Spectrophotometer



Video Laryngoscope



Sleep Study
NOx Units



Information Technology

£1.0m was invested in a range of IT equipment

- Server and network infrastructure
- E Prescribing
- Cyber security
- Storage Area Network
- Desktops and devices
- System upgrades
- Virtual Desktop Infrastructure
- Business Intelligence systems



WoW Laptop Carts



Electronic Prescribing and Medicines Administration Carts

Estates Works

£2.9m was invested in schemes to deliver site improvements and comply with health and safety standards and legislation. The main items of investments included:

- Acute Coronary Care Unit
- WREN unit
- Discharge Lounge
- Bereavement Office
- Ward Bathrooms
- Lighting and Flooring
- Fire Suppression System, Doors and Alarms
- Electrical Infrastructure works
- Water Safety Compliance system
- Refurbishment of buildings and roofs
- Repair of car parks, footpaths and pavements





Investment

Cash Flow Statement

Under the terms and conditions of the working capital loan the Trust is required to maintain a minimum cash balance of £1.2m. The cash balance at 31st March 2019 was £1.3m with the key movements in the year summarised in the table below:

| Narrative | £m |
|----------------------------------------------|------------|
| Opening balance as at 1st April 2018 | 1.2 |
| Deficit | -16.0 |
| Non cash items included in deficit | 7.1 |
| Loans received from Department of Health | 16.9 |
| Capital expenditure | -7.2 |
| Working balance movements | -0.7 |
| Closing balance as at 31st March 2019 | 1.3 |

- The £16.9m loan was to cover the 2018/19 planned deficit

Use of Resources Risk Rating and Audit Opinion

- The Trust recorded a **Use of Resources Rating score of 3**
- The Annual Accounts were signed off on the basis of a **going concern**
- The Trust received an **unqualified audit opinion** from it's External Auditor (Grant Thornton) with no concerns raised during the audit and stated that the financial statements represented a true and fair view of the Trust's affairs



Financial Outlook 2019/20



- Breakeven financial position (including Provider Sustainability, Financial Recovery and Marginal Rate Emergency Tariff Funding of £17.9m)
- Capital investment programme £13.5m including expansion of Radiology function, a new Midwifery Led Unit, implementation of electronic prescribing, and new medical equipment
- Working capital loans of £22.1m are repayable in 2019/20. Awaiting plans from NHS Improvement
- Year 2 sustainability contract with main commissioners to provide financial coverage to focus on improving care pathways for our patients
- Develop system sustainability plan

Let's Take a Break



Lead Governors' Report
Mr Norman Holding, Public Governor

Membership Report

| | WHH FT Membership N = 9118** | Warrington (n = 205100) | Halton (n = 125746) |
|---------------------------------------|------------------------------------|----------------------------|------------------------|
| Asian/Asian British | 1.8 | 2.4 | 0.2 |
| Black/African/Caribbean/Black British | 0.3 | 0.4 | |
| Mixed Multiple Ethnic Groups | 0.5 | 1.1 | |
| Other ethnic group | 0.2 | 0.3 | 1.5 |
| White | 96.8 | 95 | 98 |
| Prefer not to say | 0.4 | - | 0.3 |
| Source: | | Borough Profile 2015 | CENSUS 2011 |

**Public constituencies only*

***To note for purposes of accurate comparison the Rest of England constituency has been excluded*

| Gender (source NOMIS 2017) % | WHH FT | Warrington | Halton |
|------------------------------|--------|------------|--------|
| - Female | 65.7 | 50.4 | 48.8 |
| - Male | 34.3 | 49.6 | 51.2 |

- Historic Target- 4% of population which is equivalent to **13,192** members
- Focus is now is on being representative of population rather than numbers of members
- We are under represented by men by at least 15%
- We are under represented by 15-19 year olds by at least 5%
- We are most under-represented by white non-British and Mixed ethnic groups
- Our new Patient, Public Participation and Involvement Strategy to which our membership is core, will address representation.

Governor Activity 2018/19

June 2018 Governor Elections

- 8 Public Constituencies eligible for election, 9 vacancies
 - 3 Governors elected for a second term
 - 3 new Governors were elected
 - 3 constituencies remained vacant.

- **Council of Governors**
 - 16 Public Governors (5 Vacant)
 - 5 Staff Governors (2 Vacant)
 - 6 Partner Governors

- **Governor led Groups**
 - Quality in Care
 - Governor Engagement Group
 - Governors Working Group

- **Governors Actively Involved with:**
 - Patient Experience Committee
 - Charitable Funds Committee
 - Ward Observation Visits

In year the Governors were involved in:

- CQC Inspection
- Chairman's Monthly Brief
- Chairman – Lead Governor monthly 1 to 1
- Governor Training – Internal and External
- Attendance at North West Governors Forum
- Attendance at National Governors Conference
- Bi-annual Governors / NED meetings
- New Hospitals Groups Warrington & Halton

Council of Governors Initiatives

- Introduction of a Governor Working Group – To review the Constitution and the general working of the Council of Governors.
 - Change to Governor Terms of office from 2 terms of 3 years, to a maximum 3 terms of 3 years
 - Change to NED Terms of office from 2 terms of 3 years, to a maximum 3 terms of 3 years
- The introduction of Governors attending the following Trust Committees
 - Audit
 - Strategic People
 - Financial
 - Quality
 - Charity

Council of Governors Initiatives

- Both Public and Private Board attended by Lead Governor
- Reviewed the make up of the Partner Governors
- Governors Nomination and Remuneration Committee
 - Reviewed the remuneration received by the Chairman and Non-Executive Directors
 - Extended the term of a Non-Executive Director
 - Participated in and Approved the Chairman's Annual Appraisal
 - Approved the process for the appointment of a new Non-Executive Director

Governors' Engagement Group

Work Plan

- Governor Recruitment
- 'What Matters to Me' Conversation Cafes
- Public, Patient Participation and Involvement Strategy
- Governor Engagement Group 2019 Work Plan
- Trusts Engagement Dashboard
- Trust Newsletter
- Trust's new Web site
- Annual Members Meeting and Open Day

Governors Quality in Care Group

Agenda

- Trust Quality Dashboard
- Feed Back from Board Quality Committee
- CQC Reports and Updates
- Quality Academy
- Quality Accounts and Quality Priorities
- Quality Improvement
- Complaints
- Family & Friends
- Governor Observations

Governor Observation Visits - Monthly

- **What:** A small group of Governors visit areas of the Trust and submit a report of their finding to the Trust
- **How:** Locations for visit often signposted by complaints. Completion of reports resulting in a 'confidence' score
- **Objective:** Obtain patients and staff views and to better understand, first-hand, the Trust operations. Gain first impressions and review wards/departments against CQC inspection criteria (Safe, Caring, Responsive, Effective & Well Led)

Areas visited during the past year

**Discharge and
Frailty Suits**

**B1 Intermediate
Care Halton**

Endoscopy/UCU Halton

**AMU
Warrington**

**ICU
Warrington**

**A8 General
Medical**

**B10 / B11 Children's
Warrington**

**B3 Intermediate Care
Halton**

**K25
Warrington**

A5 Surgical

A3 Coronary Care Unit

Why do we do it?

- Effectively fulfil the role of Governor by holding the non-executive directors individually and collectively to account for the performance of the board of directors
- To feed back information about the Trust, its vision and its performance to members, public and stakeholder organisations
- To represent the interests of the members of the Trust as a whole and the interests of the public
- A chance to get closer to the “coalface” rather than in the board room
- Identify and report any areas in need of improvement
- Patients and staff get to meet and speak with their Governors
- Because we enjoy doing it!



Look Forward 2019-20
Mel Pickup CEO

Our quality journey continues...

CQC Report Oct 2017

Our ratings for Warrington and Halton Hospitals NHS Foundation Trust

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|---------|----------------------|----------------------|--------|----------------------|----------------------|----------------------|
| Overall | Requires improvement | Requires improvement | Good | Requires improvement | Requires improvement | Requires improvement |

18 months later...

CQC Report July 2019

Inspected and rated

Good



The CQC rated WHH **GOOD**.
Critical Care was rated **OUTSTANDING** for Caring.

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|---------------------|------|-----------|--------|------------|----------|---------|
| Warrington Hospital | Good | Good | Good | Good | Good | Good |
| Halton Hospital | Good | Good | Good | Good | Good | Good |
| Overall Trust | Good | Good | Good | Good | Good | Good |

Our Mission is to be **OUTSTANDING** for our patients, our communities and each other.



Warrington and Halton Hospitals
NHS Foundation Trust

Our quality journey continues...

Ratings for Warrington Hospital

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|----------------------------------------------|----------------------------------|-----------------------|------------------------------|----------------------------------|----------------------------------|----------------------------------|
| Urgent and emergency services | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Requires improvement Nov 2017 | Good Nov 2017 | Good Nov 2017 |
| Medical care (including older people's care) | Good ↑ Jul 2019 | Good ↑ Jul 2019 | Good ↔ Jul 2019 | Good ↑ Jul 2019 | Good ↑ Jul 2019 | Good ↑ Jul 2019 |
| Surgery | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 |
| Critical care | Good ↑ Jul 2019 | Good ↔ Jul 2019 | Outstanding ↑ Jul 2019 | Good ↑ Jul 2019 | Good ↔ Jul 2019 | Good ↑ Jul 2019 |
| Maternity | Good Jul 2019 | Good Jul 2019 | Good Jul 2019 | Good Jul 2019 | Good Jul 2019 | Good Jul 2019 |
| Services for children and young people | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 |
| End of life care | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 |
| Outpatients and diagnostic imaging | Requires improvement Nov 2017 | Not rated | Good Nov 2017 | Good Nov 2017 | Requires improvement Nov 2017 | Requires improvement Nov 2017 |
| Overall* | Good ↑ Jul 2019 | Good ↑ Jul 2019 | Good ↔ Jul 2019 | Good ↑ Jul 2019 | Good ↑ Jul 2019 | Good ↑ Jul 2019 |

Ratings for Halton General Hospital

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|----------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|
| Urgent and emergency services | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 |
| Medical care (including older people's care) | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Good Nov 2017 | Requires improvement Nov 2017 | Good Nov 2017 |
| Surgery | Good ↑ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 |
| Outpatients | Good Jul 2019 | Not rated | Good Jul 2019 | Good Jul 2019 | Good Jul 2019 | Good Jul 2019 |
| Overall* | Good ↑ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↔ Jul 2019 | Good ↑ Jul 2019 | Good ↑ Jul 2019 |

Not inspected in 2019

Critical Care

- ✓ CQC Outstanding for Care
- ✓ First ward to receive **Gold Accreditation**
- ✓ And the unit's 10th Anniversary!



Critical care

Good



Jul 2019

Good



Jul 2019

Outstanding



Jul 2019

Good



Jul 2019

Good



Jul 2019

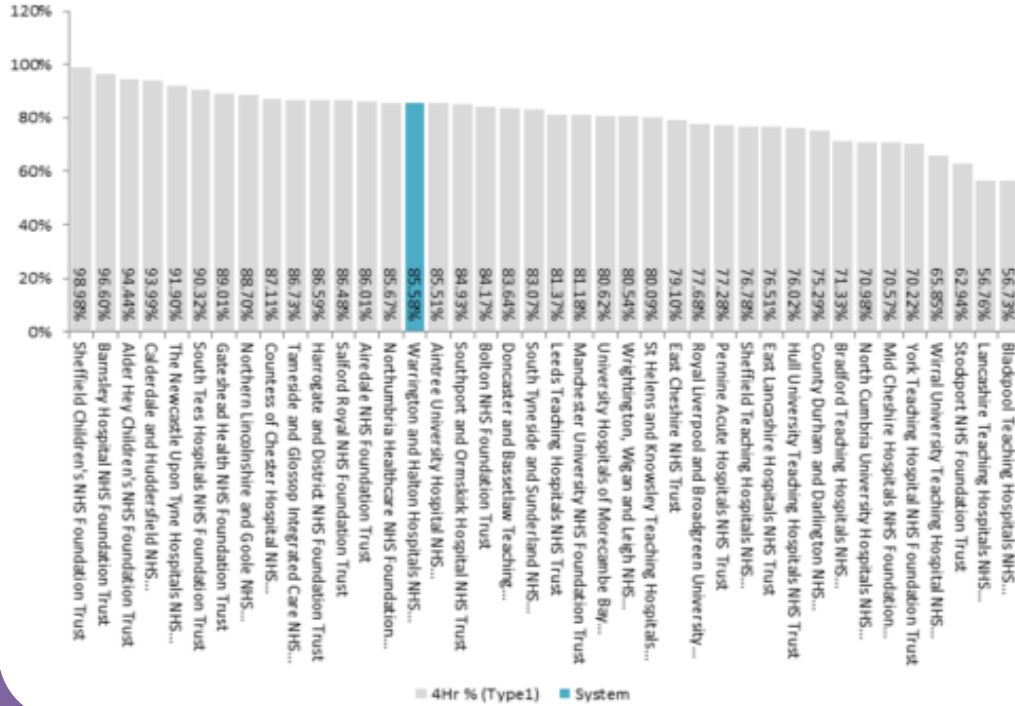
Good



Jul 2019

We are focussing on improving the 4hr-standard

4hr performance - type 1 only



- ✓ Steady improvement from April 2019 and continuing
- ✓ Ranked 29th out of 123 Acute Trusts (w/c 25.8.19)
- ✓ Implemented new 'Decision to Admit time' to reduce ED waits
- ✓ Test of change for a 'Combined Assessment Unit' to increase assessment capacity 24/7 – just completed, very successful!

We continue to invest in our Estate...





COSTA

Wellington & Hutt
Hospital Clinics

Reception



glon & Halton
tals' Charity

stock shop

Reception



We are opening a new Midwife-Led Birth Centre early 2020...

- ✓ £1.5m investment
- ✓ Even more choice for women
- ✓ Additional to our existing maternity offer
- ✓ Ground floor Croft Wing





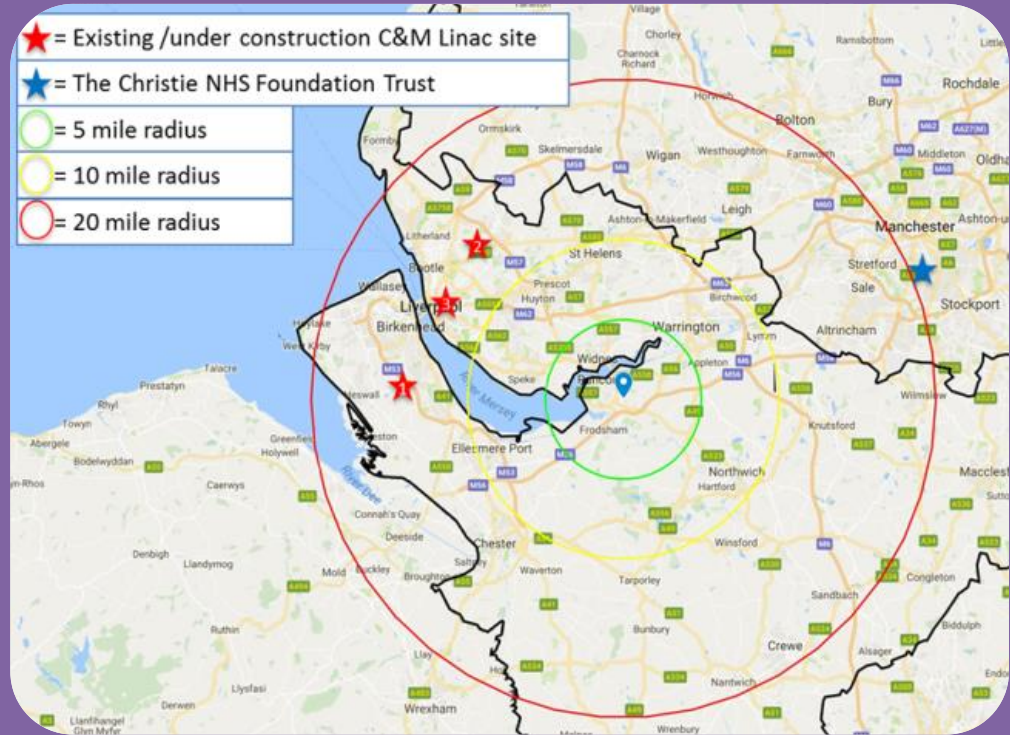




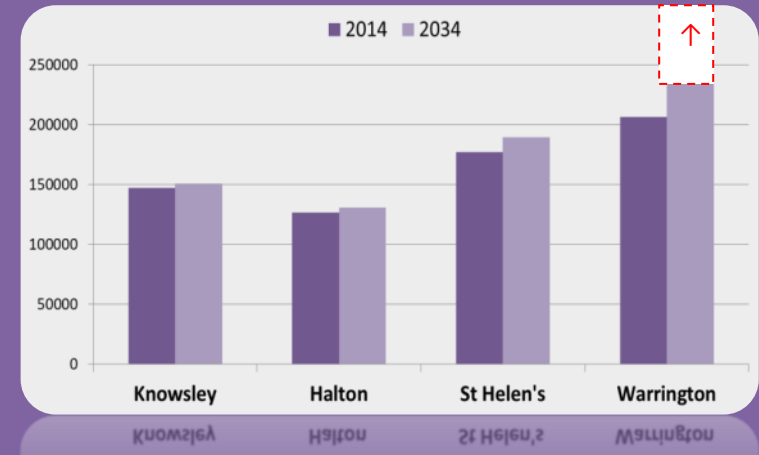
We will participate in the current, second procurement exercise for Urgent Treatment Centres in Halton



We will continue to bid for the Eastern Sector Cancer hub to be located at Halton



Borough Council population data



The new Halton Hospital and Wellbeing Campus



- ✓ Strategic Outline Case for approval Nov 2019
- ✓ Appraisal of funding options ongoing
- ✓ Engagement continues

A new hospital for Warrington

- ✓ In WBC's Local Plan
- ✓ WBC exploring potential sites
- ✓ Working on Strategic Outline Case
- ✓ Engagement underway and will continue



BCH – WHH Integration

- ✓ Shared posts: Medical Director, HR&OD Director
- ✓ Co-location of Comms and L&D Teams
- ✓ Back office cost efficiencies
- ✓ Strategic case for integration



Move to Teaching Status 1st October 2019



**Warrington and Halton
Teaching Hospitals**

NHS Foundation Trust

Mandate to work towards University Status (circa 3 years) in partnership
with University of Chester

Implementing the NHS Long Term Plan

Making sure everyone gets the best start in life

Delivering world-class care for major health problems

Supporting people to age well

Reducing stillbirths and mother and child deaths during birth by 50%

Preventing 100,000 heart attacks, strokes and dementia cases

Developing more rapid community response teams to prevent unnecessary hospital spells, and speed up discharges home

Providing right care for children with a learning disability

Spending at least £2.3bn more a year on mental health care

Giving more people more say about the care they receive and where they receive it, particularly towards the end of their lives.

The Future is Bright for WHH

I shall miss you all.

This is Me

Q&A

Chairman, Steve McGuirk CBE DL