

We are



And together we



make a difference

Annual Members Meeting

Thursday 22nd September 2016 4-6pm

Halton General Hospital

Agenda

- 4:00pm Chairman Welcome, Steve McGuirk CBE DL
- 4:05pm Annual Report - 2015/16, Mel Pickup Chief Executive
Prof. Simon Constable, Medical Director
Sharon Gilligan Chief Operating Officer
- 4:20pm Financial Review, Andrea Chadwick, Director of Finance
- 4:35pm Governors' Report, David Ellis and Peter Folwell, Public Governors
- 4:50pm Proposed changes to the composition of the Council of Governors
Steve McGuirk, Chairman
- 5:00pm Forward plan 2016/17, Mel Pickup Chief Executive
- 5:15pm Q&A session
- 5:30pm Close

Annual Report 2015-16

Mel Pickup, Chief Executive

Prof Simon Constable, Medical Director

Sharon Gilligan, Chief Operating Officer



HIGH QUALITY,
SAFE HEALTHCARE
QUALITY PEOPLE SUSTAINABILITY



We are WHH

Chief Executive's Overview

- Extremely challenging year
- Commenced with forecasted deficit of £15m
- Having a deficit puts us in breach of operating licence – Monitor enforcement notice
- Care Quality Commission report published July 2015
- Recruitment difficulties, increased agency staff use
- Difficulty achieving 4-hour target for A&E

CEO Overview/2

- Deployment of Lorenzo EPR and Ormis Theatre system in November
- NHS Improvement support for 4-hour target – MADE event
- Opening of the Runcorn Urgent Care Centre at Halton General and Widnes UCC funded by Halton CCG
- Creation of eight new clinical business units – putting leadership in the hands of our clinicians
- National recognition for our staff and services

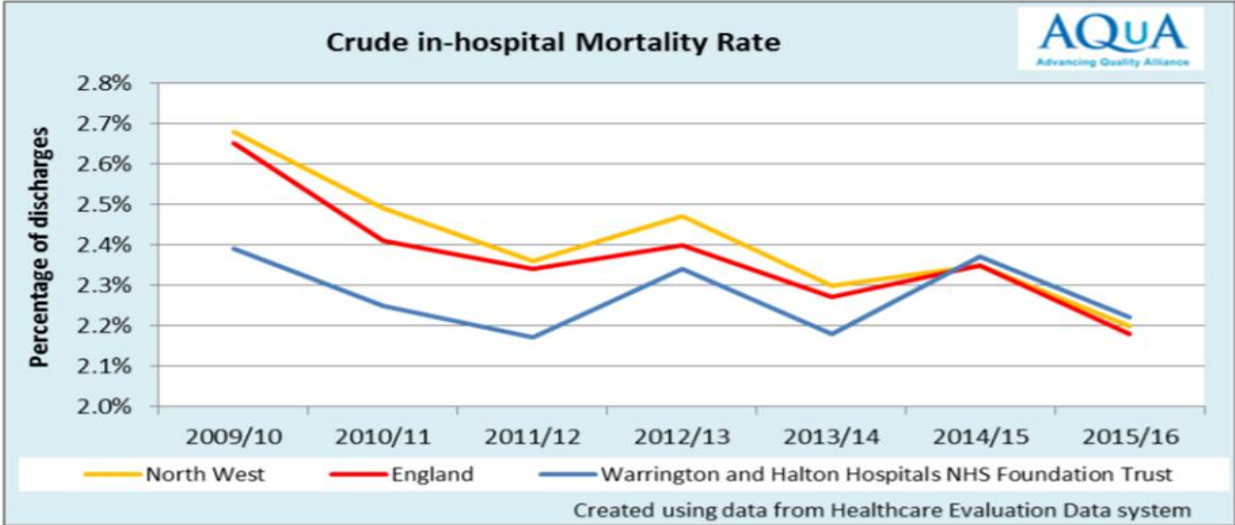
Quality in Care

Prof Simon Constable, Medical Director

Quality Challenges

- Patient Access – 4 hour standard
- General Medical Council (GMC) and Health Education North West (HENW) Enhanced Monitoring for Trainees
- Mortality rates
 - Crude mortality rates
 - SHMI
 - HSMR

Mortality Rates



- Our trend is in line with what is happening across the North West and England
- Our HSMR is currently slightly higher than other Trusts – probably due to coding issues and the recording of palliative care encounters
- We are working with clinicians and our coding team to rectify this

Quality Success

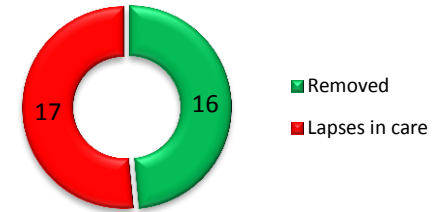
- 10% reduction in grade 3 pressure ulcers
- Improvements in patient falls
- Infection control

Healthcare Associated Infections 2015 - 2016

Clostridium difficile

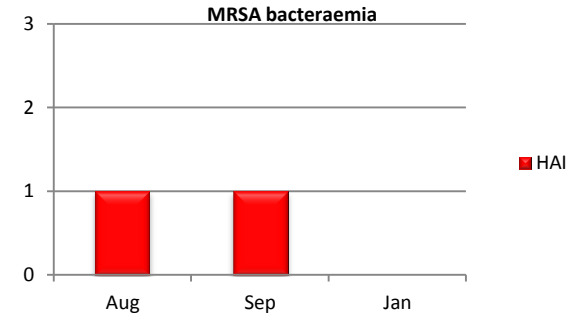
- 33 cases reported ('ceiling' of 27)
- CCG review and 16 cases deemed unavoidable
- Actions in place to drive improvements

Clostridium difficile case reviews
2015 -16



MRSA bacteraemia

- 2 hospital apportioned cases reported
- Learning implemented
- No cases since 17th September 2015



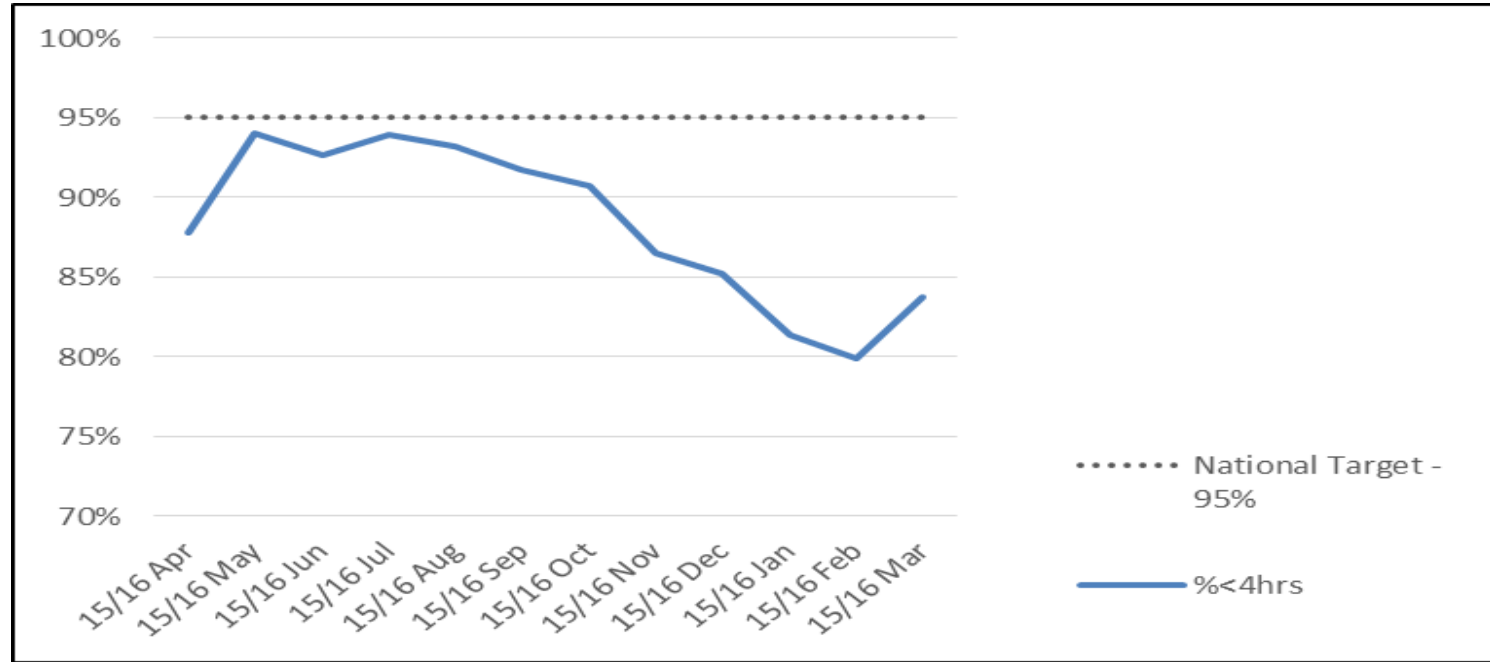
Quality Improvements

- Urgent Care Centre & Ambulatory Care
- Lorenzo and electronic patient record
- New clinical leadership structure
- AQUA best performing trust in NW – hip and knee replacement surgery, our trauma unit recognised by peer review
- Forget-Me-Not unit recognition

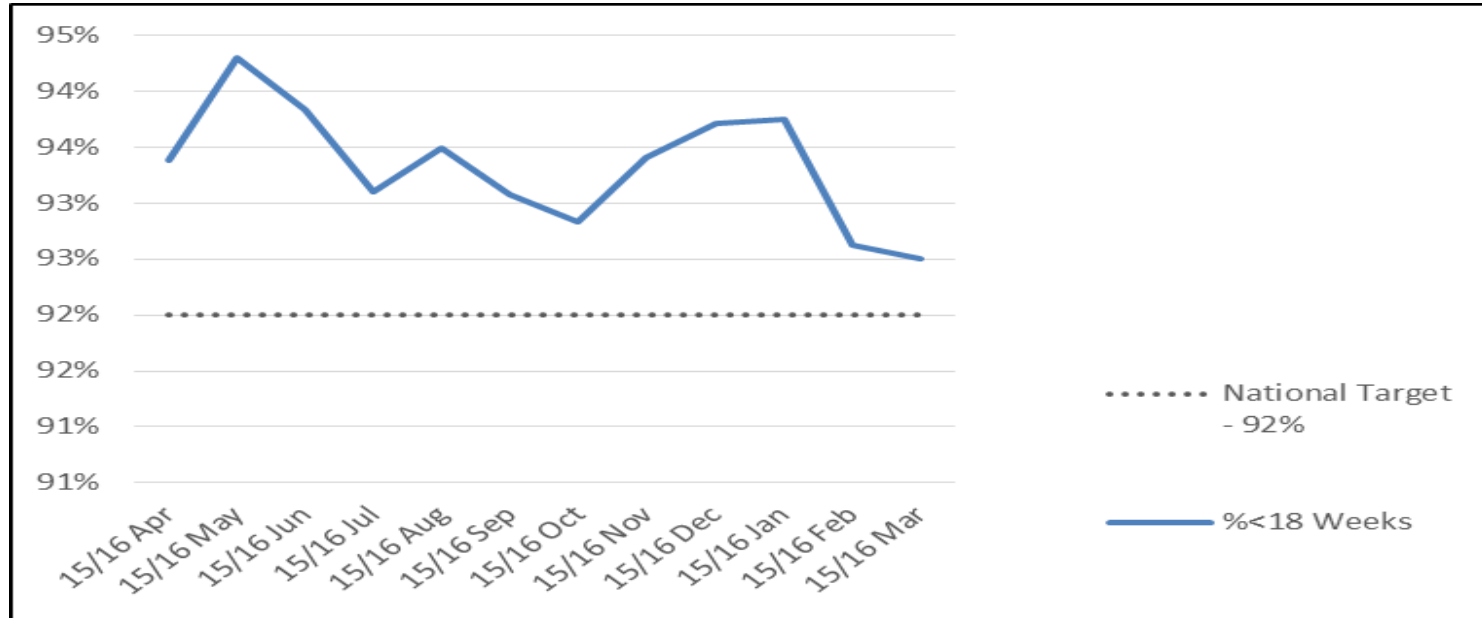
Our Operations

Sharon Gilligan, Chief Operating Officer

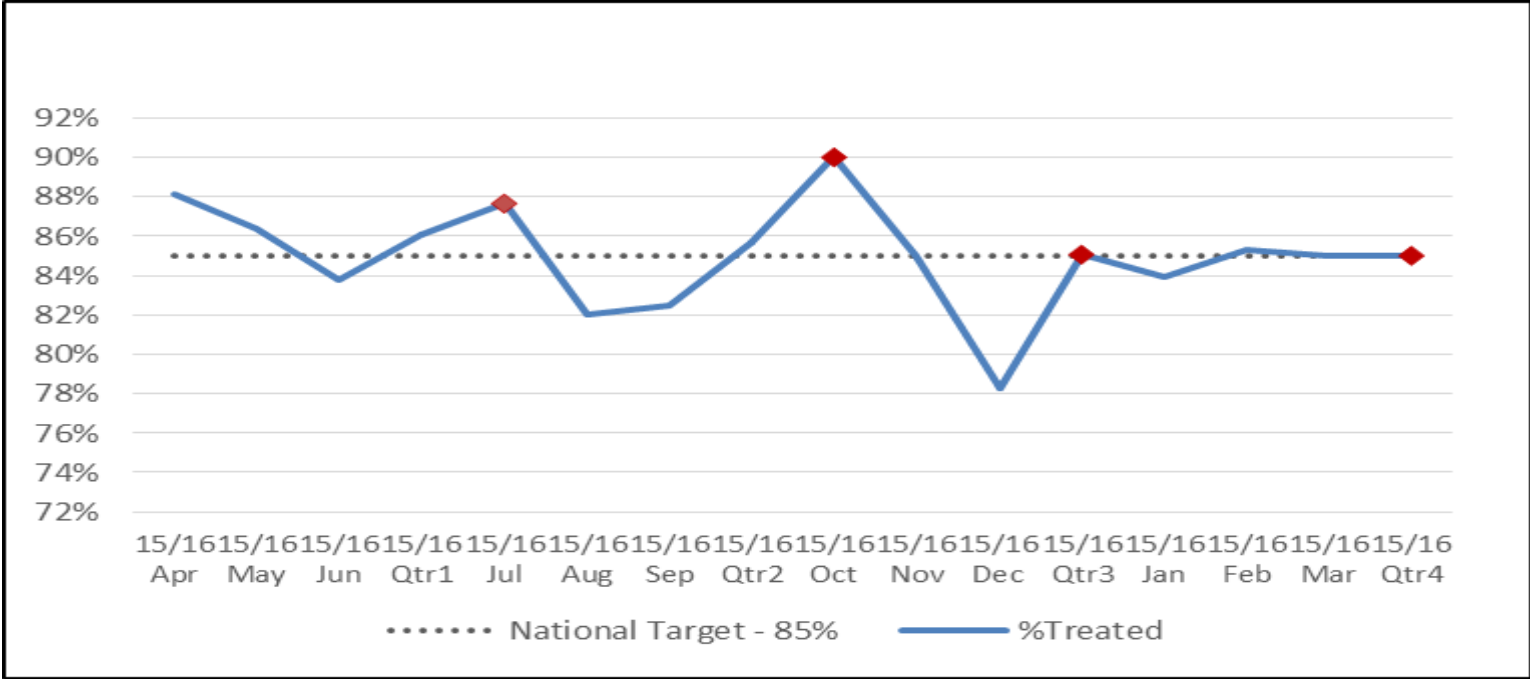
Four Hour Standard 2015/16



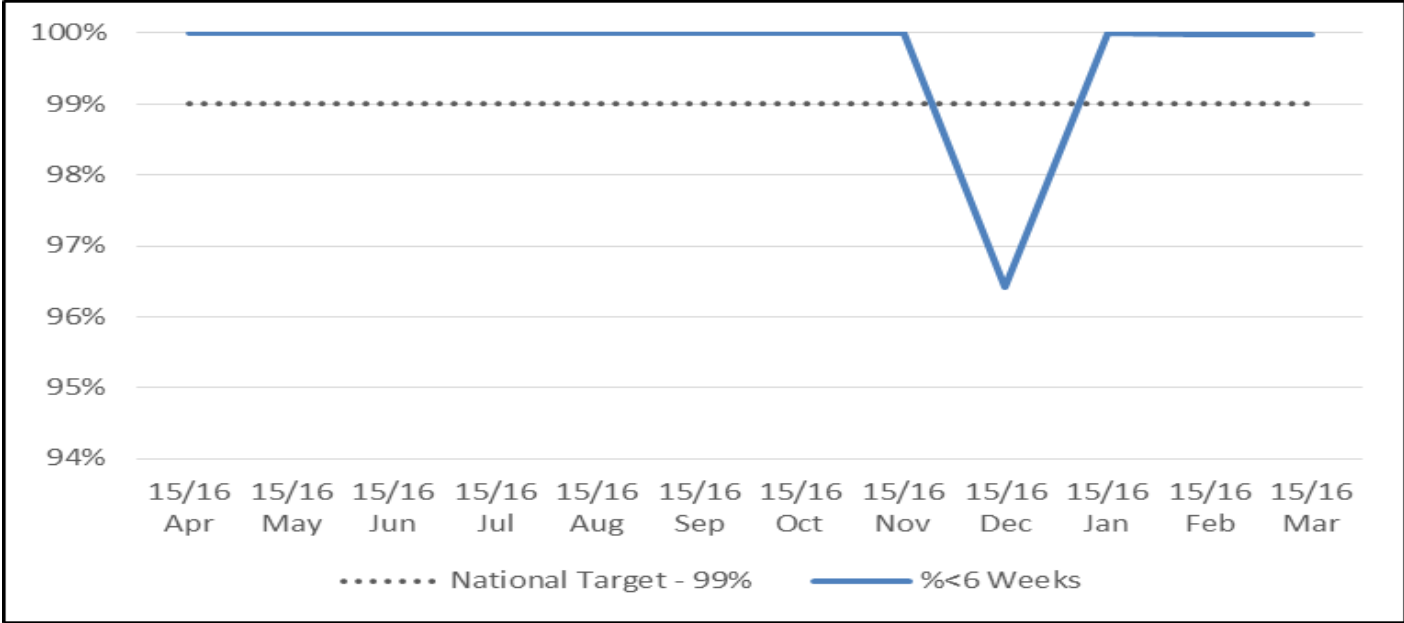
Referral To Treatment (RTT) Incomplete pathways 2015/16



62 Day Cancer Treatments 2015/16



6 Week Diagnostics 2015 /16



Finance and Audit Report 2015-16

Andrea Chadwick

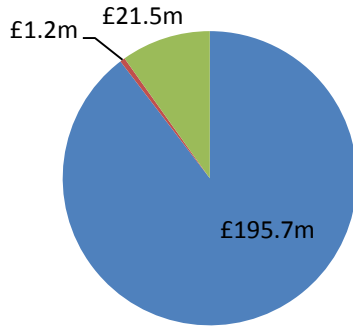
Director of Finance and Commercial Development

Financial Position

Narrative	Budget £m	Actual £m	Variance £m
Operating Income	219.5	218.4	-1.1
Operating Expenditure	-229.2	-231.7	-2.5
Finance Costs	-4.5	-4.0	0.5
Deficit excluding exceptional items	-14.2	-17.3	-3.1
Exceptional Items	0.0	-1.0	-1.0
Deficit including exceptional items	-14.2	-18.3	-4.1

- The Trust ended the year with an operating deficit of £17.3m, including efficiency savings of £8.2m
- Exceptional items relate to the impairment of fixed assets following an asset revaluation exercise.

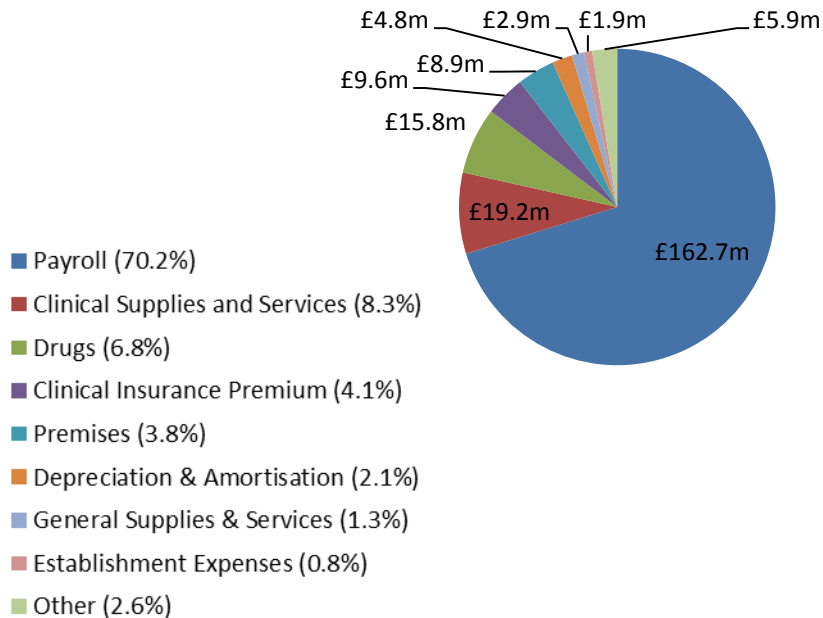
Where did the money come from?



- Clinical income from NHS commissioners (89.6%)
- Clinical income from non NHS commissioners (0.6%)
- Non clinical income (9.8%)

- The total operating income generated by the Trust is £218.4m.
- The largest source of income is clinical income at £196.9 (90.1%) with the main commissioners being Warrington CCG, Halton CCG, St Helens CCG and NHS England.
- The largest source of non clinical income is for education and training at £8.1m 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 was the money spent on?



A few facts....

- The total operating expenditure of the Trust is £231.7m.
- The largest area of expenditure is payroll at £162.7m (70.2%).
- The trust employed an average number of employees equivalent to 3,720 staff, with clinical and support staff accounting for 2,889 (78%) and non clinical staff 831 (22%).

Cost Savings

The Trust delivered efficiency savings of £8.2m as summarised below a number of initiatives including workforce redesign, improved utilisation, bed reductions, better procurement, temporary staffing reductions and drug usage and price reductions.

Type	£m
Income	4.0
Pay	2.2
Drugs	0.3
Clinical Supplies and Services	0.7
Non Clinical Supplies	1.0
Total	8.2

Capital Investments

The Trust invested £7.0m in capital assets to improve the services and environment for patients, visitors and staff as summarised in the table below:

Investment	£m
Information Technology	3.8
Site Infrastructure	1.0
Medical Equipment	0.9
Estates Rationalisation	0.7
Fire Compliance	0.4
Site Improvements	0.2
Total	7.0

Some of our capital projects



CMTC MRI SCANNER



Theatre Operating Equipment



Theatre Operating Stacker and Vent Lighting



Urgent Care Centre



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Appleton Wing and Ward redecoration



IT PC, Tablet and VOIP phone and WiFi System



Cash Flow Statement

The Trust is required to maintain a minimum cash balance of £1.2m. The cash balance at 31st March 2016 was £2.6m with the key movements in the year summarised in the table below:

Narrative	£m
Opening balance as at 1st April 2015	4.5
Deficit	-18.3
Non cash items included in deficit	5.8
Loans received from Department of Health	15.8
Capital expenditure	-7.0
Other movements	1.8
Closing balance as at 31st March 2016	<u>2.6</u>

Financial Sustainability Risk Rating and Audit Opinion

In attendance: Danny Harvey, Senior Associate PWC

- The Trust recorded a Financial Services Risk Rating score of 1.
- The Annual Accounts were signed off on the basis of a going concern.
- The Trust received an unqualified audit opinion from its External Auditor (PriceWaterhouse Cooper) 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

- In 2016/17 the Trust has planned for a deficit of £7.9m (including Sustainability & Transformational Funding of £8.0m)
- The Trust has applied for a working capital loan of £7.9m to maintain liquidity
- The Trust is committed to working with its partners in the Local Delivery System and Sustainability & Transformation Plans footprint to ensure that services remain clinically and financially sustainable



Governors report

David Ellis and Peter Folwell, Public Governors



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Membership report

Public	Affiliated	Staff	Total
11678	239	4251	16168

Membership numbers at 31st March 2016

- Target- 4% of population which is equivalent to 10,573 public members
- Under target for members under 22
- Over target for over 22
- Men under-represented
- Recruitment focussed on under-represented groups
- “Your Hospitals” now published every quarter in Warrington Guardian and Runcorn and Widnes World (focus on general public)

Public/Your Health events/recruitment

- Stroke awareness
- Cardiology
- Breast cancer
- Ophthalmology (planned)
- Diabetes (planned)
- Audiology (planned)
- Open day at Warrington – more than 500 visitors
- Recruitment events at Riverside college/Cronton college/ Disability Awareness Day

Governor survey work



- Our topic for last year was “Outpatients”
- We ran initial focus groups to better understand the questions we needed to ask
- Our objective was to understand what is important to our patients so that these could be given priority for improvement

A few key points from our survey

- The shorter the waiting time, the better....
- ..but people like to be kept in the picture if there is a delay
- People like to be treated with respect, warmth and understanding...high quality communication is critical
- Our patients need to have confidence in their doctor/nurse
- Clear information is very important

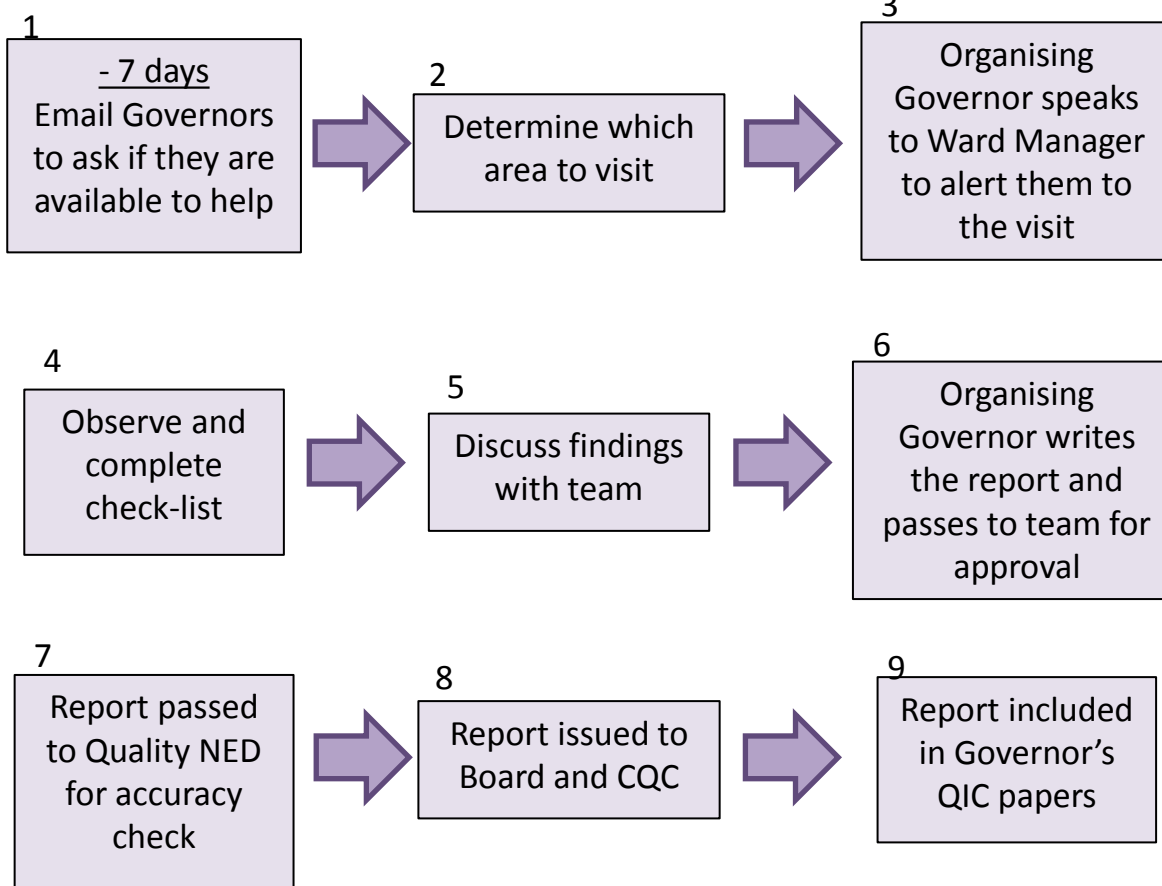
A couple of governors are now invited to the Patient Experience Committee, making it easier to take our findings forwards

Governor's Ward Observation Visits

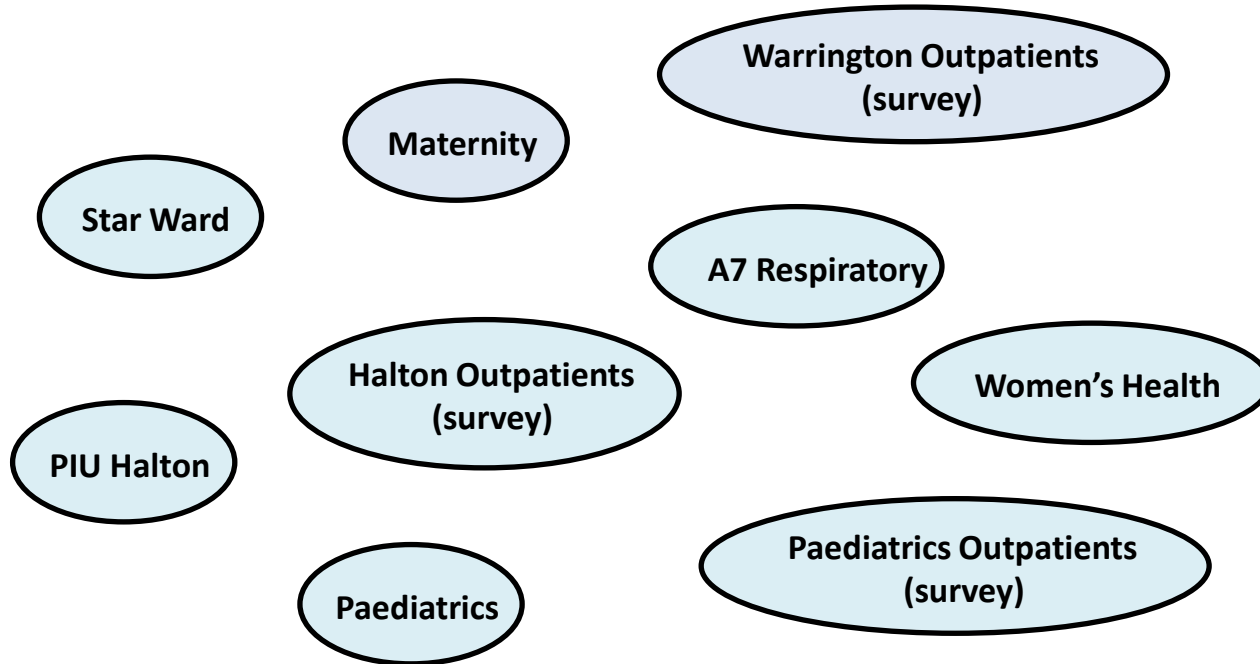
Started: October 2011

Frequency: Approx. once a month

Objective: To better understand, first-hand, the Trust operations



Areas visited during the past year



Why do we do it?

- Greater insight into what's actually happening in the Trust
- A chance to get closer to the “coalface” rather than in the board room
- Identify and report any areas in need of improvement
- Patients get to meet their Governors
- Because we enjoy doing it!



Steve McGuirk, Chairman

Notification of Proposed Changes to the composition of
the Council of Governors



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Notification of deferred elections

- We are finding it increasingly difficult to recruit Governors
- There are currently 3 vacant constituencies
- There will be 6 constituencies subject to election in December 2016
- There are a number of options available which are currently being considered by our Council of Governors and which will be debated at full Council meeting on 20th October 2016
- Pending the outcome of this debate we have notified Governors that we will defer the planned elections (Oct-Nov) until January 2017
- More information will be published following this Council meeting.

Mel Pickup, Chief Executive Looking Forward 2016-17

Our focus for 2016-17

1. Continue to deliver Quality, Safe Care and an Excellent Patient Experience
2. Become an integrated healthcare provider for the population of Warrington and Halton.
3. Align with the vision of the 5 Year Forward View by establishing a secondary care collaborative in partnership with St Helens and Knowsley and Southport Ormskirk Hospitals
4. Achieve our financial and operational targets

Delivering Quality, Safe Care

Our patients and the care we provide is paramount, our aim is:

‘To ensure that all care is rated amongst the top quartile in the North West of England for patient safety, clinical outcomes and patient experience’



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An integrated care provider

- Integrated Out of Hospital services:
 - Reduce the number of patients remaining in hospital after their acute episodes
 - Pull patients back from the hospital setting by sending the appropriate clinical/ social interface upstream of the hospital setting
 - Redesign use of current resources to greater effect for the patient and clinicians
 - Management of the whole process into ‘different’ settings



Collaborating for Sustainability – the 5YFV

- We have formed an Alliance Local Delivery System with our partners St Helen's and Knowsley and Southport and Ormskirk
- Aim to deliver acute services for a population of circa 850,000 across Mid Mersey and bridge the gap in:
 - Health and Wellbeing
 - Care and Quality
 - Finance and Efficiency
- If we 'do nothing' our Alliance organisations face a funding gap of nearly £300m by 2021
- **We are building new, collaborative ways of working around the patient**



Becoming sustainable

- As a Trust we are currently achieving the KPIs set by NHS Improvement in order to receive our STF of £8m
 - Achievement of financial plan (planned £7.9m deficit)
 - Achievement of cost improvement plan (£10.7m savings)
 - Achievement of trajectories on the 4 hour standard, diagnostic waits, referral to treatment times and cancer waiting times
- There is a long way to go to March – and winter in between!

And finally!

WHH Volunteers is open for business!



Delivered in partnership with

Wellbeing Enterprises CIC and
Halton and St Helen's Voluntary and Community
Action

Formal launch in September, fantastic
response from people of all ages and
all backgrounds.



WHH Charity has had a splendid year!



Staff Engagement and involvement continues to go from strength to strength





The George Lloyd Restaurant



A very generous legacy from a former patient enabled refurbishment of the canteen and lots of patient equipment to be bought. RIP George.



We launched our £100K Making Waves Children's Ward campaign



CALL HELEN ON 01925 662666 OR VISIT WHHCHARITY.ORG.UK FOR MORE INFORMATION

Hot off the press!

Today we launch our WHH Charity campaign to raise funds to create the second phase Dementia Ward Garden



Help make our
Dementia Ward
GARDEN
A BLOOMING SUCCESS

OUR FORGET ME NOT DEMENTIA WARD HAS A VISION TO CREATE AN ENVIRONMENT THAT WILL BRING A LITTLE PIECE OF NORMALITY TO OUR PATIENTS AND THEIR FAMILIES SO THEY CAN RELAX AND RECUPERATE.

Your support will mean the world to them!

DONATE NOW
Visit our website
whhcharity.org.uk

Call us on
01925 662666

Pop in to our
Charity Office

OR POST YOUR DONATION DIRECT TO:
THE WHH CHARITY OFFICE, WARRINGTON HOSPITAL,
LOVELY LANE, WARRINGTON, WA5 1QG

 Forget Me Not

 Together we can do more

 Warrington & Halton Hospitals Charity
Warrington and Halton Hospitals NHS Foundation Trust
Registered Charity Number 105454

 /WHHCharity @WHHCharity

And finally!



We know that #TeamWHH is amazing – now everyone else knows it too!

We are double-finalists in the prestigious national HSJ Awards for:

- Compassionate Care for our Dementia Care Team and
- Patient Safety for our Maternity Services Unit

Q&A session



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