



Welcome to the Annual General Meeting (AGM)

30 September 2024





The Shrewsbury and
Telford Hospital
NHS Trust

Welcome

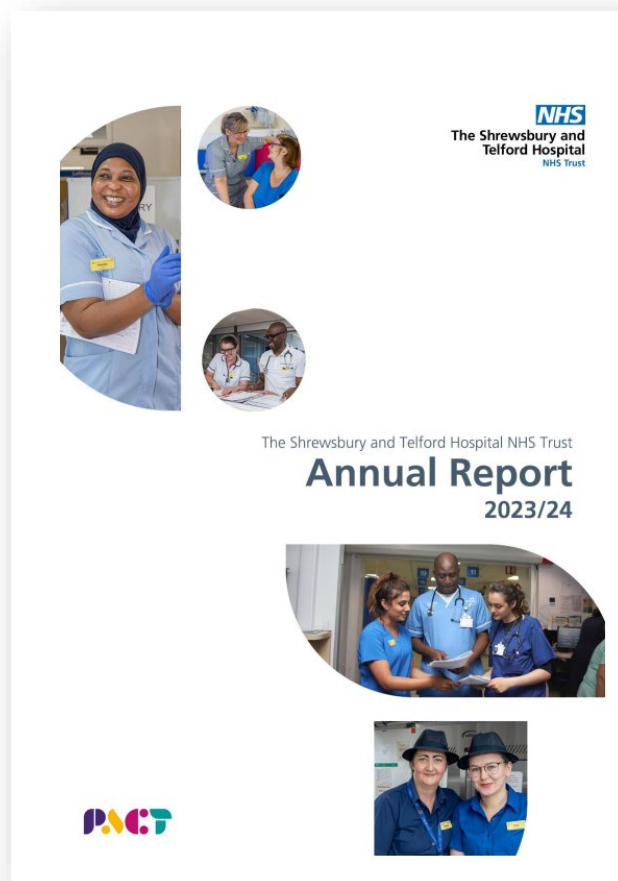
Teresa Boughey

Acting Chair



Our Vision: To provide excellent care for the communities we serve

2023-24 Annual Report and Accounts



Agenda item	Name
Welcome	Teresa Boughey, Acting Chair
Review of the Year 2023/24 and Forward Look	Jo Williams, Interim Chief Executive and relevant Directors
Financial Review 2023/24	Helen Troalen, Executive Director of Finance
External Auditor Report	Andrew Cordoza/ Tony Felthouse, KPMG
Our quality, safety and maternity developments	Dr John Jones, Executive Medical Director Hayley Flavell, Director of Nursing
Our future strategy and developments	Nigel Lee, Director of Strategy and Partnerships
Receiving the Annual Report and Accounts	Teresa Boughey, Acting Chair
Question and answer session	Teresa Boughey, Acting Chair & Directors
Closing remarks	Teresa Boughey, Acting Chair



The Shrewsbury and
Telford Hospital
NHS Trust

Review of 2023/24 and forward look

Jo Williams
Interim Chief Executive



Our Vision: To provide excellent care for the communities we serve

Reflections on 2023/24



- Our vision and values at the heart of everything we do
- A challenging year for the Trust and NHS nationally
- Continued pressure on urgent and emergency care
- High demand for elective, cancer and diagnostic services
- Significant financial deficit
- Improvements through our Getting to Good programme
- Listening to our staff, patients and families
- Focus on quality, safety and patient experience
- Partnership and integration
- Significant capital investments
- Digital transformation
- Improved governance

Improved CQC rating

- We have made progress and improved our overall rating to **'Requires improvement'**.
- Services rated overall as **'Good'** for caring and **'Requires Improvement'** for safe, effective, responsive and well-led.
- Organisation-wide commitment to further improvement.
- Urgent and emergency care everyone's responsibility.

"Improving culture of high quality, sustainable care"

"Patient experience at the heart of everything"



Stronger Together

We want to apologise to those affected by the Dispatches programme and to everyone in our communities who has experienced long waiting times, overcrowding and a lack of privacy when accessing emergency care.

- Trust-wide commitment to improve urgent and emergency care
- Understand our challenges - action plan in place
- Continue to make steady improvements
- Investment in new services
- Additional staffing in our emergency departments
- Initial improvements to four hour performance
- Focus on the nutrition and hydration needs of our patients
- Continue to listen to patients to identify improvements
- Work with partners to improve flow



We are grateful for everything colleagues are doing and thank our patients for their support and understanding

Making a difference for our patients



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

- Reduced waiting times in 2023/24
- 30,000+ appointments in the new Community Diagnostic Centre
- Enhanced same day emergency care
- Integrated new models of care
- Increased Patient Initiated Follow Up (PIFU) rates
- Improved quality metrics
- Introduced Patient Safety Incident Response Framework
- Rated green for infection, prevention and control

Our people

- Ongoing cultural transformation programme
- Focus on inclusive leadership through the Galvanise programme
- Enhanced multi-disciplinary learning and new facilities – opened SaTH Education, Research and Improvement Institute (SERII)
- Successful apprenticeship scheme – 205 apprentices
- Mandatory training maintained above 90%
- Improved indicators in the national Staff Survey 2023





Our focus during 2024/25

Our objectives for 2024/25

1

Deliver our quality priorities and the next phase of our Getting to Good programme



2

Deliver elective services and implement enhanced recovery



3

Maintain Faster Diagnostics Standard / achieve 62-day Referral to Treatment Standard



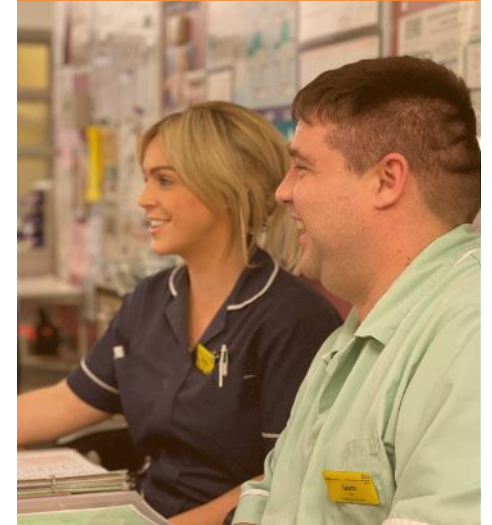
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Improve Urgent and Emergency Care (UEC) performance in line with GIRFT recommendations



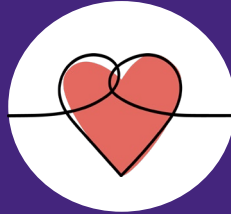
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Use of resources – operate within our budget through delivery of efficiency and productivity measures



Our enablers for 2024/25

1 Live the People Promise in our teams through valuing difference and inclusivity



2 Deliver our workforce plan, including agency cost reduction, based on the principles of Train, Retain and Reform



3 Develop an estates plan to optimise our current estate and continue to progress our Hospitals Transformation Programme



4 Develop and implement a sustainable travel plan to improve patient and staff experience



5 Electronic Patient Record (EPR) - complete phase one (implement and embed CareFlow PAS and ED) and commence phase two



Hospitals Transformation Programme

This clinically-led programme will improve care for everyone through clinically sustainable services, improved flow and more modern facilities.

Multi-million pound investment in service changes:

- Planned care services all year round
- Improved emergency care services delivered from a modern, purpose-built Emergency Department
- 24/7 urgent care at both PRH and RSH, faster access to the right clinician at the right time



HOSPITALS
TRANSFORMATION
PROGRAMME

NHS
The Shrewsbury and
Telford Hospital
NHS Trust

Planned care services will be available throughout the year at Princess Royal Hospital leading to fewer cancellations and delays for operations

A new front entrance at Princess Royal Hospital will improve the experience for everyone

We're
improving
care for
everyone



Follow
transfo
jou

Improved emergency care services at the Royal Shrewsbury Hospital in a modern, purpose-built Emergency Department with patients seen more quickly and by the right clinician

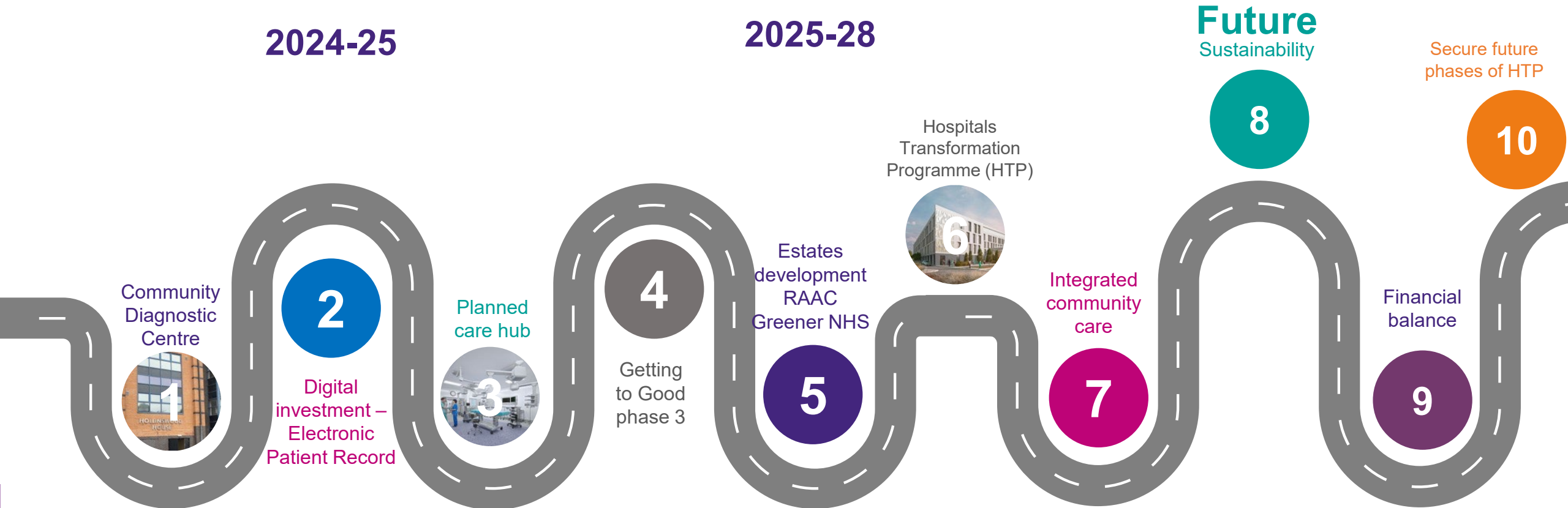
Ongoing improvement of our services

- Continue our transformation programmes: maternity, paediatrics, neonatal, urgent and emergency care
- Engage and involve patients, families, carers and communities
- Further clinical research
- Invest in services:
 - Planned Care Hub
 - Restoration of elective orthopaedic services
 - New Gamma Camera
 - Care closer to home – Community Diagnostic Centre
 - Modern Patient Administration System – further digital investment planned
 - £16.2m investment in greener energy



Our roadmap to improvement

We have ambitious plans to improve care for all the communities we serve. After many years of development, we are pleased they are closer to becoming a reality with significant investment planned over the next five years.





The Shrewsbury and
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Financial review 2023/24

Helen Troalen

Executive Director of Finance



Our Vision: To provide excellent care for the communities we serve

Context

- Challenging financial year
- Recover core services and productivity
- Out of hospital capacity
- Capital investment



Financial Performance 2023/24



Revenue in-year:

- Breakeven plan; actual outturn £54.6m
- Driven by unfunded Covid related costs, purchasing additional planned care capacity and use of escalation capacity

Revenue underlying plan:

- Deficit plan of £40.9m; actual outturn £50.4m
- Driven by junior doctor rota compliance, acute floor investment to support flow and inflation.

Capital expenditure:

- £77.2m spend in total, in line with plan - £18.4m internally generated funds; £58.8m centrally funded public dividend capital

Key investments 2023/24

Revenue

- Pathology growth
- Radiology workforce
- Acute floor
- Maternity
- Energy

Capital

- Digital infrastructure
- Telford Planned Care Hub
- Additional capacity funding
- HTP enabling works
- Equipment replacement

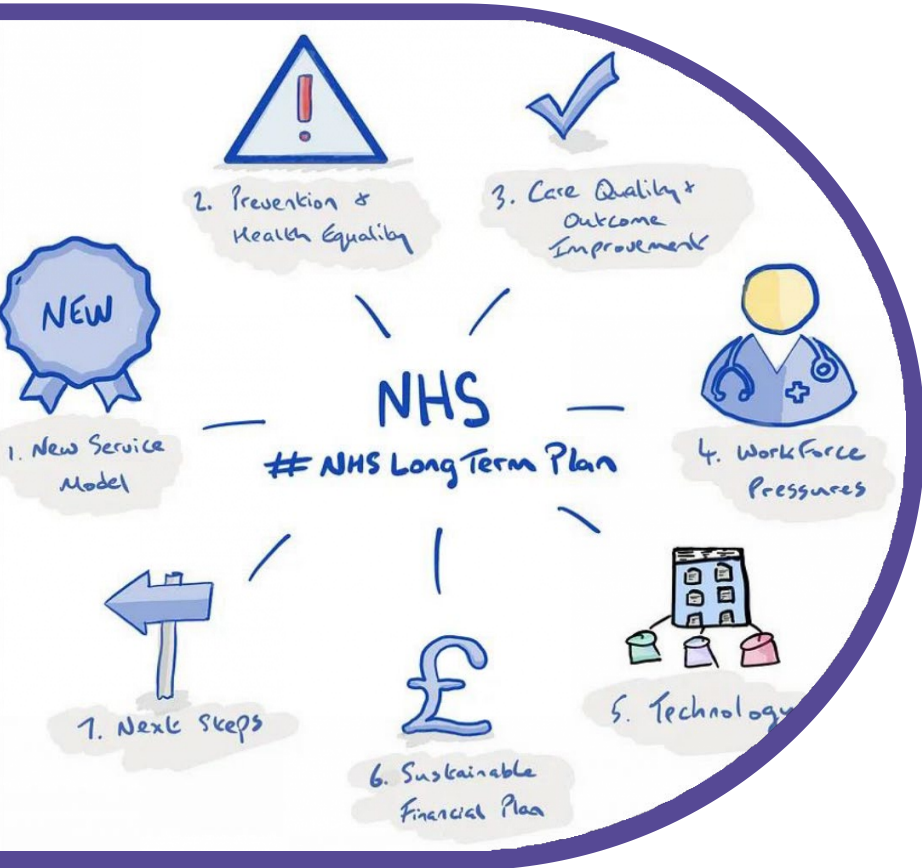


Financial Planning 2024/25

- Agreed a £44.3m deficit plan (revenue)
- 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 of £47.3m



Financial Planning 2024/25



Activity plan (elective restoration)

Bed plan (escalation reduction)

Staffing plan (agency reduction)

Efficiency plan

Underpinned by improved financial governance



Report from the External Auditor

Andrew Cordoza and
Tony Felthouse

KPMG



Annual General Meeting Presentation

The Shrewsbury and Telford Hospital NHS Trust

September 2024

Team members

Core team from KPMG's Public Sector External Audit Department



Andy Cardoza
Engagement Lead



I am responsible for delivery of all of our services to the Trust. I lead all of our key meetings and presentations to management, along with 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 & 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 our work on the more complex sections of the audit”

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

Audit timescale



Audit Planning

January - February 2024

Our **Audit Plan** was approved by Audit and Risk Assurance Committee in **April 2024**.



Interim Fieldwork

February - March 2024

We undertook our risk assessment, process and controls work.



Final Fieldwork

May - June 2024

We reported to Audit and Risk Assurance Committee on **14 June 2024** – well ahead of the submission deadline of 28 June 2024 in respect of our **opinion on your Financial Statements** and **conclusion on Value for Money arrangements**.



Annual General Meeting

30 September 2024

We report back our findings from our **2023/24 audit work** on the Trust's **Financial Statements** and **Value for Money arrangements**.

Requirements

- Do the financial statements give a true and fair view of the financial position of the Trust as at 31 March 2024 and of 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** on the Trust's 2023/24 financial statements



We audited your **2023/24 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 Board members 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 **1 misstatement** totalling £0.5m and **2 control deficiencies**.

Requirements

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

We issued an **unqualified conclusion** on the Trust's 2023/24 arrangements for securing economy, efficiency and effectiveness in its use of resources.



We reviewed the Trust's delivery of its **2023/24 plan** and **operating deficit of £54.6m** for the year ended 31 March 2024.



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



The **cash balance at year end was £54.7m, which was c. £51m higher than the prior year**. The increase is largely due to additional NHS England funding of £45.5m passed to the Trust in March 2024.



The Trust's **2024/25 financial plan** submitted in June 2024 and showed a **deficit of £44.2m within an overall system planned deficit of £89.8m**.



Since November 2022, the Trust has drawn support from NHSE under the Provider Revenue Support Scheme. **The total drawn down by the Trust as at 31 March 2024 was c. £136m**.



The Trust **delivered an efficiency of 2.8%** comprising £10.5m of recurrent and £8.3m of non-recurrent savings.



The Shrewsbury and
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Our quality developments 2023/24

Dr John Jones
Executive Medical Director

Hayley Flavell
Executive Director of Nursing



Our Vision: To provide excellent care for the communities we serve

Focus on quality of care

Our priority is our patients and delivering high quality, safe compassionate care.

We are sorry that some patients are having long waits in our emergency departments or are waiting longer than we would want for elective and cancer services.

- Measures in place to reduce waiting times and improve patient experience in our emergency departments (additional staffing, nutrition and hydration needs, improvements to triage times, digital systems, Stronger Together)
- Investment to improve waiting times for elective and cancer services (CDC, Gamma Camera, Planned Care Hub)
- Commitment to new ways of working, and with partners (R&R wards, Virtual Ward, OPAT, GIRFT)
- Making steady progress - recognised by the CQC



Our CQC rating has improved

Some of our services were inspected in October 2023. We improved our overall rating to **'Requires Improvement'** - with caring now rated overall as **'Good'**.

CQC recognised that patient experience was at the 'heart of everything'. We have halved the number of 'must do' and 'should do' actions. Improvements are overseen through our Getting to Good programme.

Princess Royal Hospital	Safe	Effective	Caring	Responsive	Well Led	Overall
Overall	Requires Improvement	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement
Royal Shrewsbury Hospital	Safe	Effective	Caring	Responsive	Well Led	Overall
Overall	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement
Trust Overall	Safe	Effective	Caring	Responsive	Well Led	Overall
Overall	Requires Improvement	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement

Our CQC inspection

Where we were in 2021

Royal Shrewsbury Hospital	Safe	Effective	Caring	Responsive	Well Led	Overall
Medical Care (inc. Older peoples care)	Inadequate	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement
Critical Care						
End of Life Care	Inadequate	Inadequate	Requires Improvement	Inadequate	Inadequate	Inadequate
Surgery						
Urgent and Emergency Services	Inadequate	Requires Improvement	Requires Improvement	Inadequate	Requires Improvement	Inadequate
Maternity						
Outpatients						

Princess Royal Hospital	Safe	Effective	Caring	Responsive	Well Led	Overall
Medical Care (inc. Older peoples care)	Requires Improvement	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement
Children & Young People	Inadequate	Inadequate	Requires Improvement	Inadequate	Inadequate	Inadequate
Critical Care						
End of Life Care	Inadequate	Inadequate	Requires Improvement	Inadequate	Inadequate	Inadequate
Surgery						
Urgent and Emergency Services	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement	Requires Improvement
Maternity	Requires Improvement	Good	Good	Good	Requires Improvement	Requires Improvement
Outpatients						

Our CQC inspection

Where we are now

Royal Shrewsbury Hospital	Safe	Effective	Caring	Responsive	Well Led	Overall
Medical Care (inc. Older peoples care)	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement	Requires Improvement
Critical Care						
End of Life Care	Good	Good	Good	Good	Good	Good
Surgery						
Urgent and Emergency Services	Requires Improvement	Good	Requires Improvement	Inadequate	Requires Improvement	Requires Improvement
Maternity						
Outpatients						

Princess Royal Hospital	Safe	Effective	Caring	Responsive	Well Led	Overall
Medical Care (inc. Older peoples care)	Requires Improvement	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement
Children & Young People	Good	Good	Good	Good	Good	Good
Critical Care						
End of Life Care	Good	Good	Good	Good	Good	Good
Surgery						
Urgent and Emergency Services	Inadequate	Good	Requires Improvement	Inadequate	Requires Improvement	Inadequate
Maternity	Good	Good	Good	Good	Good	Good
Outpatients						

Our Quality Priorities 2023/24

1
2
3
Patient Safety

- Learning from events and developing a safety culture
- Support deteriorating patients
- Reducing inpatient falls

4
5
6
Clinical Effectiveness

- Right care, right place, right time – emergency care
- Right care, right place, right time – admission and discharge
- Delivering the best clinical outcomes

7
8
9
Patient Experience

- Learning from experience
- Focus on vulnerable patients
- Improving palliative and end of life care



Focus on learning and patient safety

In 2023/24, a key quality priority was learning from events and further developing a patient safety culture.

This is so we can continuously improve the way we deliver care and make it safer.

We have made steady progress.

- ✓ Standardised processes for safety huddles throughout our wards and departments to share best practice and learning
- ✓ Improved the percentage of staff in the 2023 Staff Survey who would feel secure raising a concern about unsafe practice and feel confident the Trust would address concerns
- ✓ Implemented new Patient Safety Incident Response Framework (PSIRF) - family liaison officers now in place to involve and support our patients



Our quality improvements

In 2023/24, we also focused on:

- Supporting deteriorating patients - sepsis training rolled out to enhance knowledge and performance on wards
- Reducing inpatient falls – Enhanced Care Support Workers/Platinum Award in Reconditioning Games
- Right care, right place, right time - specialist assessment areas/utilisation of discharge lounges
- Delivering the best clinical outcomes – dedicated NICE facilitators
- Learning from experience – learning from complaints/ specialty patient experience groups
- Vulnerable patients – learning disability charter agreed and to launch in 2024/25
- Improving palliative and end of life care - moved from an **'Inadequate'** CQC rating to **'Good'** in all domains



Involving our patients and communities

We are committed to involving our communities in healthcare through a range of engagement activities:

- Working closely with Healthwatch and Liaison partners
- Public Assurance Forum
- Public focus groups to support service changes and improvement (particular focus on HTP)
- Volunteer team has a strong young volunteer scheme, national recognition for our Volunteer to Career scheme
- Community members – almost 5000 members, over 300 volunteers and over 400 organisations
- Attended over 201 community events and meetings and held one-day People's Academies for hundreds of people
- Patient partners support range of workstreams inc. Independent Complaints Review Group, hot food, recruitment and 15 steps
- Specialty patient experience groups to enhance experience of care
- Digital stories - personal experiences of care to improve learning.



Our Quality Priorities 2024/25

Patient Safety 1

Learn from events and develop a safety culture

Integrate learning from both positive and negative incidents, using electronic communications, quarterly learning and sharing forums and an annual Trust safety conference.

Support deteriorating patients

Early recognition, escalation and response for patients at risk of deterioration and sepsis.

Reduce inpatient falls

Continue to sustain the reduction of inpatient falls and reduce the level of harm caused by falls by embedding the reconditioning games into everyday processes.

Reduce missed dose medicines

Reducing the number of omitted doses of time critical medication through improved understanding, learning from incidents and clinical guidance.

Reduce missed radiology results

Improve patient experience by reducing waiting times, supporting timely decision making and intervention through timely Radiology reporting.

Reduce pressure ulcers

Develop and implement a learning process through a new Pressure Ulcer Working Group to deliver our action plan. Implement Purpose-T in line with national guidance across all inpatient adult areas and emergency care.

2

Our Quality Priorities 2024/25

Clinical Effectiveness

3

Right care, right place, right time - emergency care

Ensure improved patient experience in our emergency departments, reducing waiting times, timely decision making and intervention. Increase screening for delirium/cognition - 75% by March 2025.

4

Right care, right place, right time - improving flow

Improve our admission and discharge processes through the Trust.

5

Best clinical outcomes for people with Diabetes - improve care

Address and improve care for people with Diabetes working closely with system partners.

6

Best clinical outcomes for people with Diabetes - foot care

Improving foot care for people with Diabetes through a diabetic foot clinic and improving foot assessments and care. To provide inpatient foot reviews and increased use of OPAT

Patient Experience

7

Learning from experience

Learning and improving from patient, carer and public experience through complaints, patient surveys, feedback and compliments.

8

Mental health training

Implement quality standards and demonstrate NICE guidance compliance.

9

Learning disabilities and autism

Improve the care and experience for patients with learning disabilities and/or Autism



Our maternity developments

Hayley Flavell

Director of Nursing

Improving our maternity services

- We have seen significant improvements in 2023/24
- Our CQC rating for maternity services is now **'good'** overall and **'good'** across all five domains: Safe, Caring, Responsive, Effective, and Well-led
- CQC Maternity Survey 2023 - found that women are listened to, treated with respect and dignity, and involved in decisions about their care
- In 2024/25, our teams remain committed to listening to women and their families and putting them at the heart of everything they do as we continue to build a safe and responsive service



What we have done

- Made good progress on actions relating to the Independent Review of Maternity Services by Donna Ockenden - more than 92% of actions delivered to date
- Delivered all 10 safety standards that contribute to the Clinical Negligence Scheme for Trusts (CNST) for 2023/24
- Implemented, in full, Saving Babies' Lives Care Bundle 3
- Recruited 10 internationally-trained midwives - to be more representative of our local communities
- Invested in care - 25 new CTG monitors, 15 of which have the option of wireless fetal monitoring





The Shrewsbury and
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Our future strategy and developments

Nigel Lee

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



Our Vision: To provide excellent care for the communities we serve

Our Trust strategy

Our vision: “To provide excellent care to the communities we serve”.

Our strategy centres around 6 strategic themes

- Extensive work has been undertaken over the last 12 months in relation to embedding and aligning our Trust strategies (within SATH and with ICB & partners)
- And informing planning for 2024/25 programmes of work from both an internal and external perspective.



SaTH as part of our Integrated Care System

Our context has developed - Major changes to the NHS landscape with the establishment of Integrated Care Systems (ICSs) and Integrated Care Boards (ICBs)

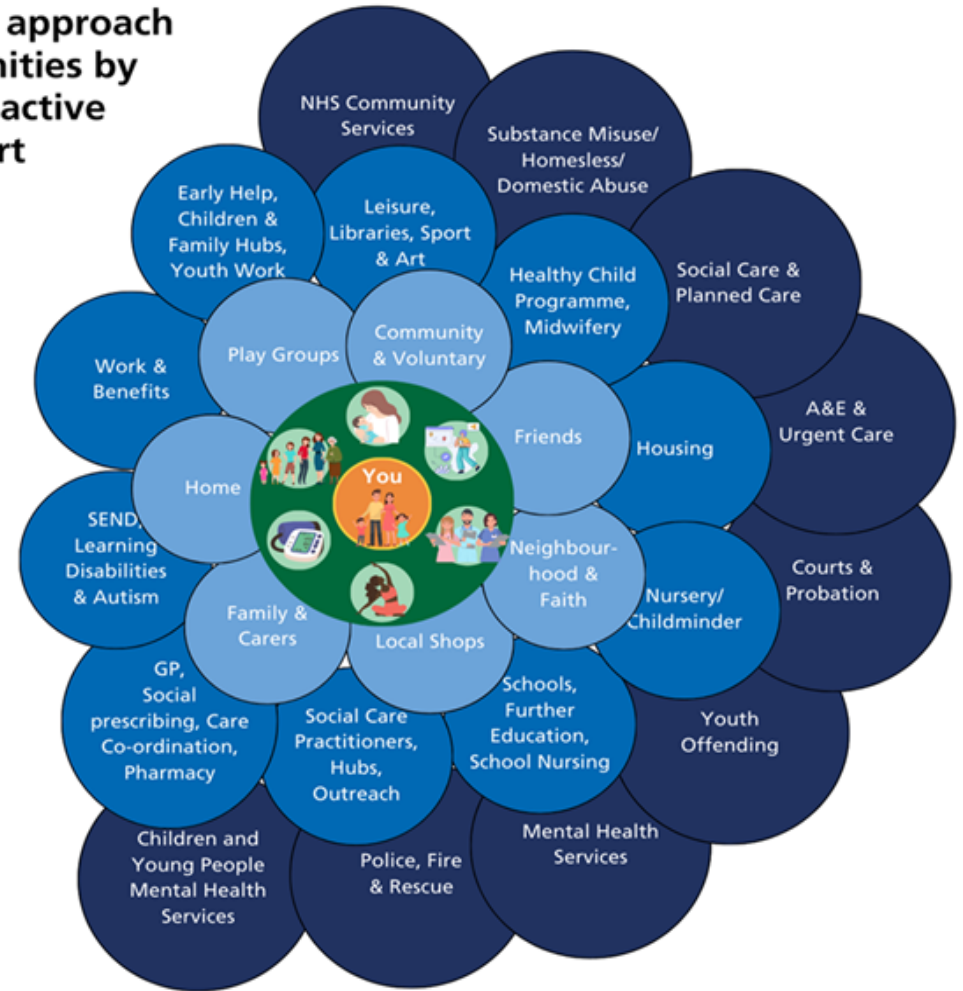
Our Trust strategy links with system's Integrated Care Strategy and Five Year Joint Forward Plan (JFP)

Increasing focus on our role in Integrated Neighbourhood Teams

Our local care neighbourhood approach will cultivate thriving communities by focusing on collaboration, proactive healthcare, and holistic support

Our aims are to:

-  Improve outcomes for children, young people, and families.
-  Promote early diagnosis and prevent avoidable illnesses in the first place.
-  Support people of all ages with self-care and managing long term conditions.
-  Implement person-centred multidisciplinary care approaches.
-  Achieve a greater emphasis and use of social prescribing.
-  Ensure people can access the right help, at the right time, in the right place within the local community.



Focus during 2023/24 – Strengthening Partnerships

- Embedding the Joint Forward Plan within SaTH, and playing a key role
- Strengthened collaborative working with local providers such as the Local Authorities, RJAH, ShropCom, MPUFT Primary Care and the Voluntary sector
- Provider Collaborative development (initially NHS Trusts)
- Role in Integrated Place Partnerships
- Continued development of key transformational programmes of work e.g. UEC, LCTP, HTP, aligned to the JFP
- Acute Collaborative with UHNM, inc. N8 Pathology network



Transforming care through technology



2023/24 has seen significant development of our Electronic Patient Records Programme and improvements, as set out in our Trust Digital Strategy – focused on delivering better care for patients and enhancing staff productivity.

- Multi-year, multi-million pound digital transformation programme enabling staff to deliver high quality care
- Preparations completed in 2023/24 to replace old Patient Administration System in April 24
- Revolutionising the way we work, involving:
 - Transferring 1 million patient records
 - Training 5,000 colleagues
- Building the necessary foundations to enable further enhancements in 2024 and supporting clinical teams to modernise care

Looking to the future

- Maximising partnership and pan-system working to deliver innovation and sustainable high-quality services
 - How our clinical services strategy enables SaTH to be fit for the future, both locally and regionally
 - How SaTH enhances its role as an “anchor organisation”
- Continued development of provider collaboration, with wider sets of partners
- Continued focus on reducing inequalities across our communities, including health inequalities
- Implementation of our digital programme – e.g. Order Comms (ICE), Pathology System, Patient Engagement Portal, Service Level systems
- Estates strategy development, including Trust’s ambitions in Greener NHS/zero carbon emissions, waste management



Receiving 2023/24 Annual Report & Accounts

Questions & Answers

Teresa Boughey and
other Directors



Closing remarks

Teresa Boughey, Acting Chair

Thank you for attending

