

Annual Members' Meeting

25 September 2023

Liam Coleman, Chair

Welcome to our Annual Members' Meeting

Format and housekeeping

- **This is a two hour meeting**
- **Please use the live chat in MS Teams for any questions but please do not include personal or confidential information**
- **We will endeavour to answer all questions tonight**
- **Please keep yourselves on mute during the call unless invited to speak**



Our agenda for today

Chair's Welcome - Liam Coleman, Chair

Financial Review 2022/23 - Simon Wade, Chief Financial Officer

Review of the year 2022/23 and look ahead to the future - Kevin McNamara, Chief Executive

Report from the Lead Governor - Chris Callow, Lead Governor

Questions from members of the public - To receive and consider any questions submitted in advance or at the meeting, through the Chair.

Financial Review 2022/23

Simon Wade
Chief Financial Officer

Plan	£19.351m deficit
Out-turn	£0.028m* surplus
Variance from plan	£19.379m favourable
Payment of suppliers	91.2% within 30 days
Cash balance	£41.9m
CIP delivery	£8.8m

* Following technical adjustments for impairments and donated assets



Income / expenditure summary

2022/23

£479.5m
Total income

£451.6m

related to patient
care activity

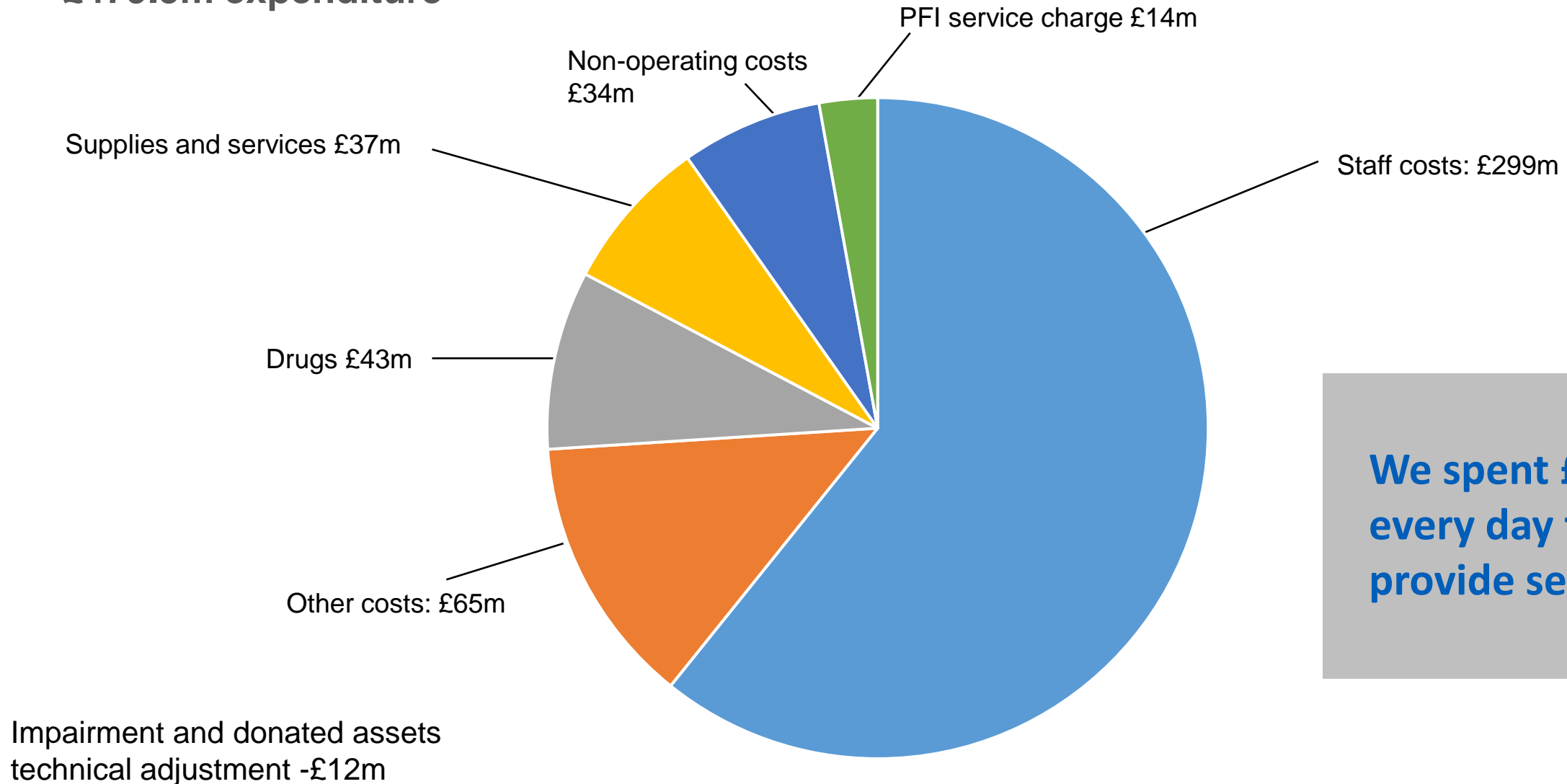
+

£27.9m

of operating income not related to patient care

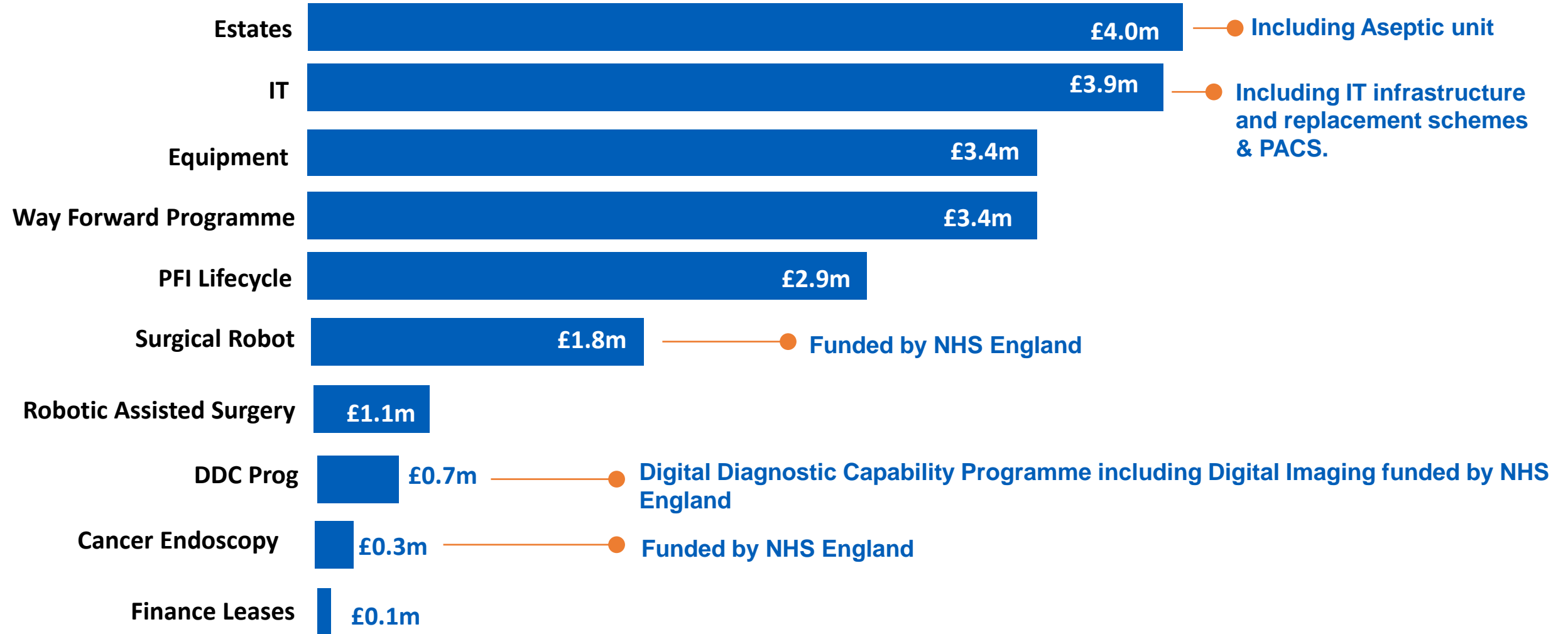
How we spent our money in 2022/23

£479.5m expenditure



**We spent £1.3m
every day to
provide services.**

Our 2022/23 Capital Programme



This year's income / expenditure summary

2023/24

£157.8m

Total income (as at Month 4)

£148.7m relates to patient care activities with a further £9.1m of other operating income

£163.1m

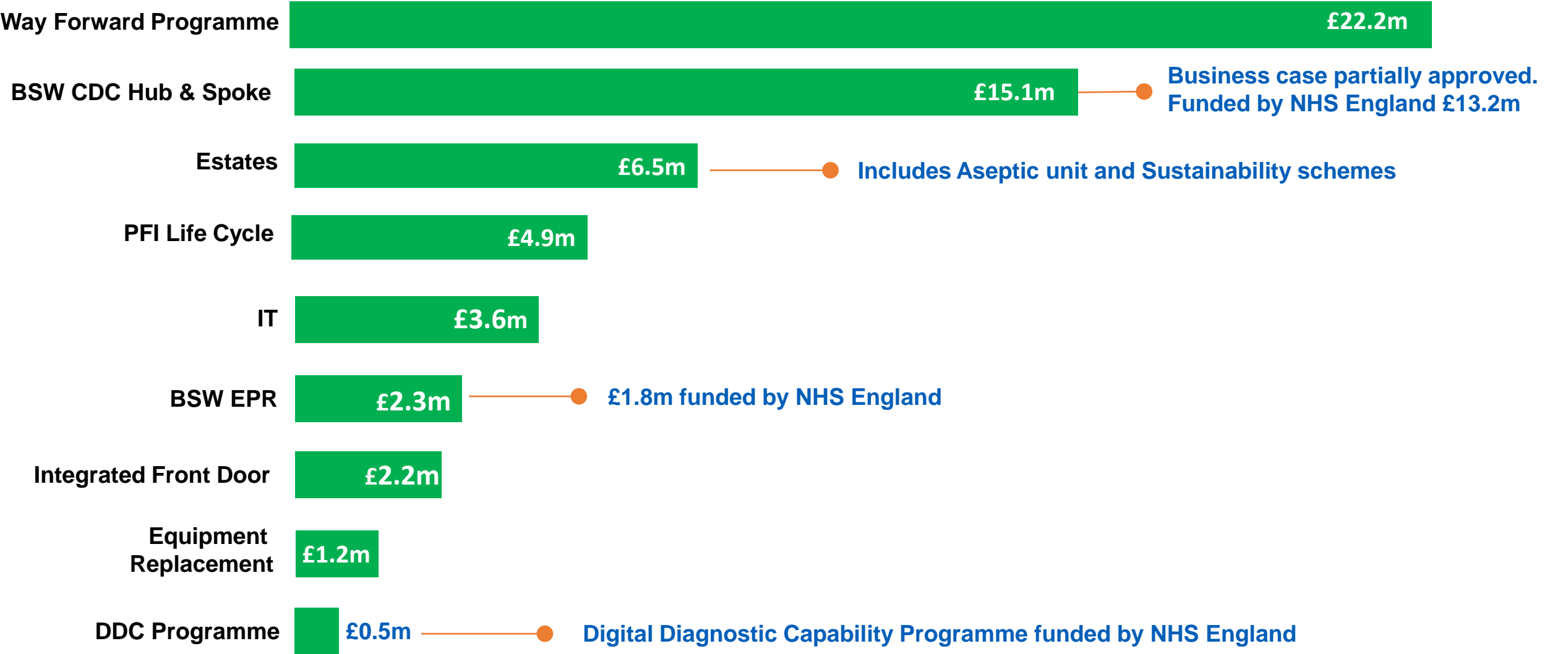
Total expenditure (as at Month 4) leads to an overall position of £5.3m deficit

£100.6m relates to pay, £52.1m relates to non-pay and £10.4m to non-operating costs.

Excludes technical adjustments for donated assets

Capital Programme

2023/24 Plan



Look back at 2022-23 and a look ahead

Kevin McNamara, Chief Executive

Who we are

We are the only integrated provider in the Bath and North East Somerset, Swindon, and Wiltshire Integrated Care System, running the Great Western Hospital, and also adult community services in Swindon.

122,970 emergency and urgent attendances in 2022/23 (90,000 pre-Covid)

13,000 operations are carried out in Theatres in a typical year

3,412 babies born in the last year

279,950 community contacts in 2022/23

405 Volunteers providing 3,500+ hours of support per month

We have **5,632** staff (4,925 WTE) and our vacancy rate is 7% on average, but was 6% in August. This equates to:

1,112	Admin and Clerical
494	Allied Health Professionals
705	Medical and dental
142	Non-clinical support
359	Scientific, therapeutic and technical
1,774	Registered nursing and midwifery
1,046	Unregistered nursing and midwifery

62% of our staff identify as White British. Of the 25% who identify as BME, there are multiple ethnic identities.

- Increased our nursing establishment by 178 WTE to ensure **safer staffing** levels are met.
- **Nursing vacancy rate** reduced from 5% 12 months ago to 3% in August.
- No vacancies within our **unregistered nursing** workforce, compared to 78 WTE vacancies in January.
- Rolling **sickness** absence rate has decreased over this period, reducing from 5.4% a year ago to 4.6% in our most recent data.

Workforce challenges include: Industrial action, agency spend for medical to cover hard to recruit roles, workforce growth compared to activity growth, and workforce spend to support activity recovery through waiting-list initiatives

Our vision and strategy

Our vision and four strategic pillars



We will deliver joined up services for local people at home, in the community and in hospital helping them to lead independent and healthier lives.



Outstanding care and a focus on quality improvement in all that we do



Improving quality of care by joining up acute and community services in Swindon and through partnerships with other providers



Staff & volunteers feeling valued and involved in helping improve quality of care



Using our funding wisely to give us a stronger foundation to support improvements in quality

Our five year strategy, developed with staff, patients, governors and others, was launched in 2019 and is now being refreshed.

To support this, we are carrying out a Big Conversation speaking to staff, patients, the public, members, and stakeholders, to consider:

- What are our priority areas?
- How do these address the needs of our local communities?
- What kind of organisation do we want to be?
- What conditions do we need to thrive?
- How can everyone contribute?

Our Big Conversation

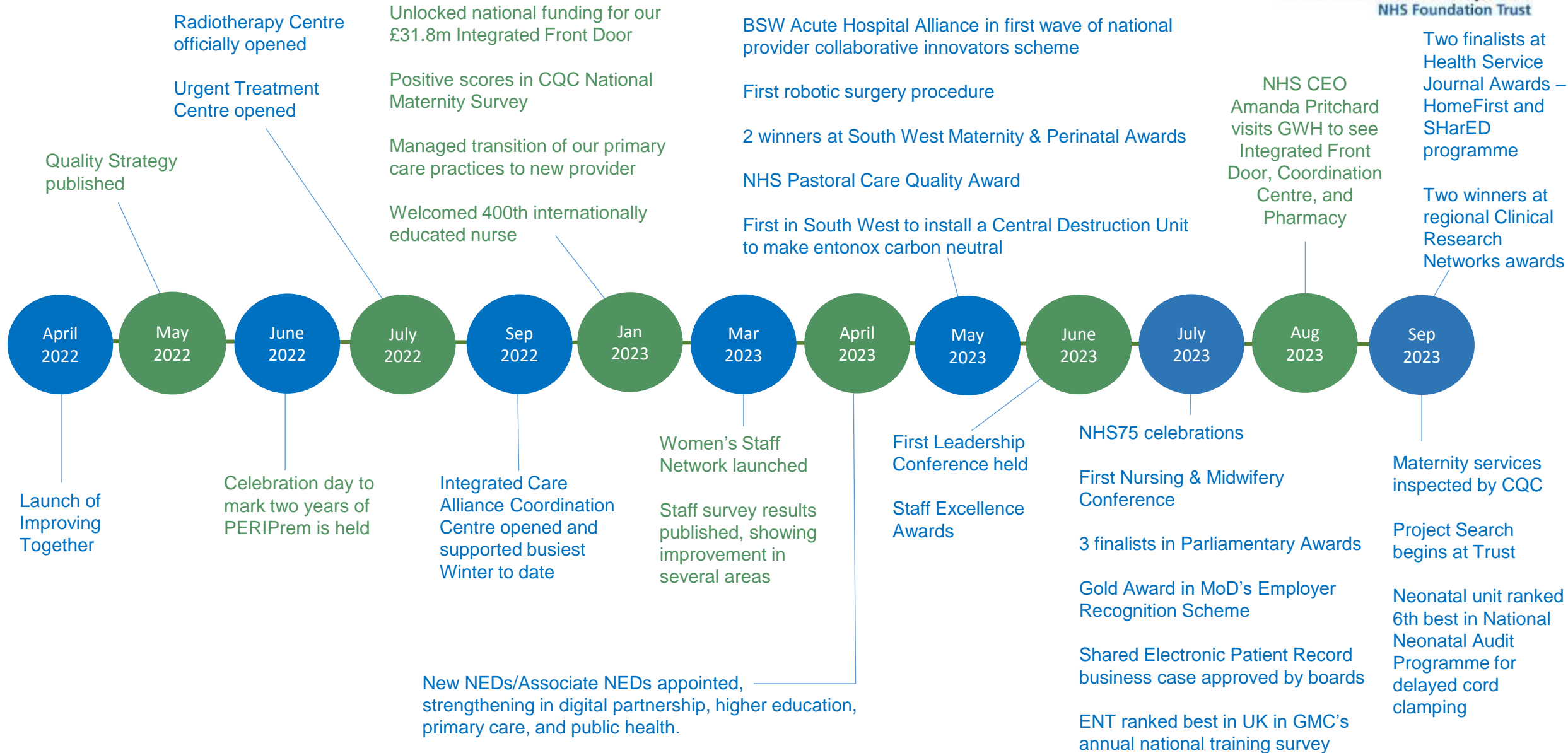


Trust Strategy 2024+

We will be engaging with our local community in the forthcoming weeks.

This programme of work will help us to build on our successes to date and set the future direction for the organisation.

Our journey: April 2022 – September 2023



NHS75

We marked the 75th anniversary of the NHS in a number of ways, including:

- Tea party for patients.
- Cakes donated by Swindon Advertiser for staff and patients.
- Video telling the story of how Swindon's Great Western Railway Medical Fund provided inspiration for the NHS.
- Naming of new GWR train after Nye Bevan.
- 75 faces for 75 years display on ground floor of GWH.
- Brighter Futures Superhero Run.
- Attending NHS 75 service at Westminster Abbey and Local NHS Champions' Reception at 10 Downing Street.
- Local media coverage.



GWH20

Along with NHS75, we also celebrated our own birthday this year – the 20th anniversary of the Great Western Hospital in December 2022.

This was widely covered in regional media, with a focus on the size of the hospital, our future developments, and the PFI legacy.

Staff, including those who moved the very first patient in to Great Western Hospital, told their stories and came together for an aerial photograph to commemorate our birthday.



Our leadership and culture

Our Trust Board

- NEDs have specialist advisory responsibilities including FTSU, safeguarding, equality, diversity and inclusion, inequalities, health and wellbeing, falls, research and development, and children and young people.
- Board workshops this year have considered digital, equality, diversity and inclusion, financial sustainability, and the patient voice and patient safety framework.
- We have taken a strong leadership role in the local health system, working with partners to develop more integrated models of care to support a population health approach to care.
- Executive team has strengthened in depth with deputy appointments and have developed a **deputies network**.
- Structured, externally facilitated programme of development in place is focused on how we work together.

Non-Executive Directors and Associate Non-Executives



Liam Coleman,
Chair



Peter Hill,
Deputy Chair



Lizzie Abderrahim,
NED



Faried Chopdat,
NED



Julian Duxfield,
NED



Paul Lewis, NED



Bernie Morley,
NED



Claudia Paoloni,
NED



Will Smart, NED



Helen Spice, NED



Claire Lehman,
Associate NED



Rommel Ravanah,
Associate NED

Executive Directors



Kevin McNamara,
Chief Executive



Dr Jon Westbrook,
Chief Medical
Officer



Lisa Cheek,
Chief Nurse



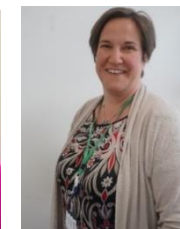
Naginder Dhanoa,
Chief Digital Officer



Jude Gray,
Chief People
Officer



Felicity Taylor-
Drewe, Chief
Operating Officer



Claire Thompson,
Chief Partnerships
and Improvement
Officer



Simon Wade,
Chief Financial
Officer

Building a better culture

We are committed to building a better culture, and focused on these areas:

Openness

Inclusion

Wellbeing

Leadership



This will help us to develop a
Just and Learning Culture

How we are responding to the Letby case

- Trust Board, Executives, and Trust Management Committee have all reflected on the issues that the Letby case raises and what it means for the way we do things. National letter sent to all Trusts highlighting expectations, ahead of a more formal inquiry taking place and learning being shared from this.
- We have asked divisions to discuss through their governance structures, and have spoken to different professional groups to discuss the outcome and the initial learning.
- We will be reviewing our current approach to enabling a speaking up and listening culture, and will commission an external assessment to provide a different perspective.
- Some of the questions we want to ask ourselves:
 - Do we have an effective culture, systems and processes in place that empower staff to speak up freely?
 - Do we have a culture, systems and processes in place that ensure we listen to those concerns effectively and act on them?
 - How effectively do we use the range of quality intelligence and data we have to ensure it acts as an early warning system to things that require a deeper look?
 - Are we supporting leaders at all levels to understand their role listening to and responding to concerns raised?



Patient Safety Incident Response Framework

- This autumn, the new Patient Safety Incident Response Framework (PSIRF) will be implemented across the NHS.
- This represents a significant shift in the way we respond to patient safety incidents, with a sharper focus on data and understanding how incidents happen, engaging with families, and taking effective steps to improve and deliver safer care for patients.
- PSIRF will replace the current Serious Incident Framework.
- Staff can expect to see changes to the management of patient safety incidents and documentation and changes to the way we learn from patient safety events. We have raised awareness of this among staff and provided training is for specific groups.

Our system and place

Place-based & system leadership

- We deliver strong place-based and system leadership.
- We stepped in to take on two challenged primary care practices in November 2019, stabilised and improved them, before transferring them to another primary care network.
- 'Team Swindon' has really developed over the last few years – far closer relationship with Swindon Borough Council and Integrated Care Board Swindon locality team.
- Place-based working has enabled us to have more focus on health inequalities – particularly important locally with Swindon being the fifth most deprived local authority out of 14 in the South West – and our role as anchor in the community.
- We are working closer with our partners across the Bath and North East Somerset, Swindon and Wiltshire region, under one collaborative Integrated Care System, with a joint committee at place.
- System-working has also been strengthened through Covid, and Acute Hospital Alliance (GWH, RUH, SFT) is developing at pace.



AHA Provider Collaborative Innovators Scheme

- Along with RUH and Salisbury we form the BSW Acute Hospital Alliance, which successfully bid to be part of the first wave of NHS England's new **Provider Collaboratives Innovators Scheme**.
- As part of the new scheme, NHS England chose nine collaboratives – one from each region – to help accelerate their development, so being part of the first cohort is recognition of the work we've done so far, and our potential to do much more in the future.
- We are the **only collaborative chosen from the South West**, with nearly 50 bids submitted across the country.
- New scheme recognises **critical role that providers play** in helping systems deliver better care.
- Being part of the first cohort will provide further **opportunities for staff** at our three organisations to collaborate more closely together.
- It also means that our experience will help to **improve future policy** around collaboratives and collaboration.
- We are working closely with NHS England to **co-design the support and expertise** we feel would provide most value to deliver our locally-agreed priorities for benefitting patients.



Acute Hospital Alliance strategic priorities



Single capital
strategy

Clinical
strategy

Open
financial
approach

Staff
modelling

Shared EPR

Improving
Together

Back office
collaboration

Joint roles

Mutual aid

Elective
Recovery

Shared
waiting lists

Virtual
clinical teams

Covid
delivery unit

Anchor
institutions

Culture of
collaboration

Our community

Our place in the community

Our position in the community gives us an opportunity to work to reduce health inequalities and improve life chances

As an employer of choice, we've developed a strategic partnership with New College Swindon to support entry routes in to our Trust. One of our first events was attended by health and social care students to discuss opportunities to work for us.

- Expand volunteer workforce
- Use apprenticeships to maximise training opportunities
- Support refugees into employment
- Provide the SEND community with inclusive opportunities

The five areas where we can make a difference as an anchor institution

Increased weighting on social value for tenders & apply priority to prompt payment for small & local suppliers

Through **procurement** of goods and services



- Use data to ensure we accurately understand the **protected characteristics** and deprivation profile of those we serve
- Clinical prioritisation to **support the most vulnerable**

Through **service delivery**

As an employer



Through **bricks and mortar**

Our most recent site developments created 44 local jobs; our long term vision for our expansion land includes the creation of community assets.



Through **corporate and civic behaviours**



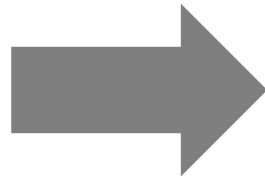
Linking with the civic university network and through the BSW Academy with other anchor organisations; our **sustainability plan delivers health and Net Zero**

What our patients tell us

Patients provide us with feedback through many different routes.

We've looked at the various types of feedback we receive, and there are clear themes in terms of what our patients are telling us:

- National Inpatient Survey 2022
- Urgent and Emergency Care Survey
- Friends and Family Test
- Complaints and concerns
- Safeguarding
- Incidents – Patient Safety Incident Response Framework priorities



Top themes from six sources of feedback:

- Wait Times – elective and emergency
- Communication – 'I want to know what's happening'

Divisional Directors of nursing and their deputies will lead workstreams using Improving Together methodology to address the issues we are commonly told about, including nutrition, communication, and personalised care.

We have a planned session planned with Matrons and Ward Managers to take this work forward.

What our staff tell us

The 2022 staff survey (published in March 2023) showed improvements in 33 questions (compared to 0 in 2021) and we scored above the sector benchmark on 16 questions (5 in 2021).

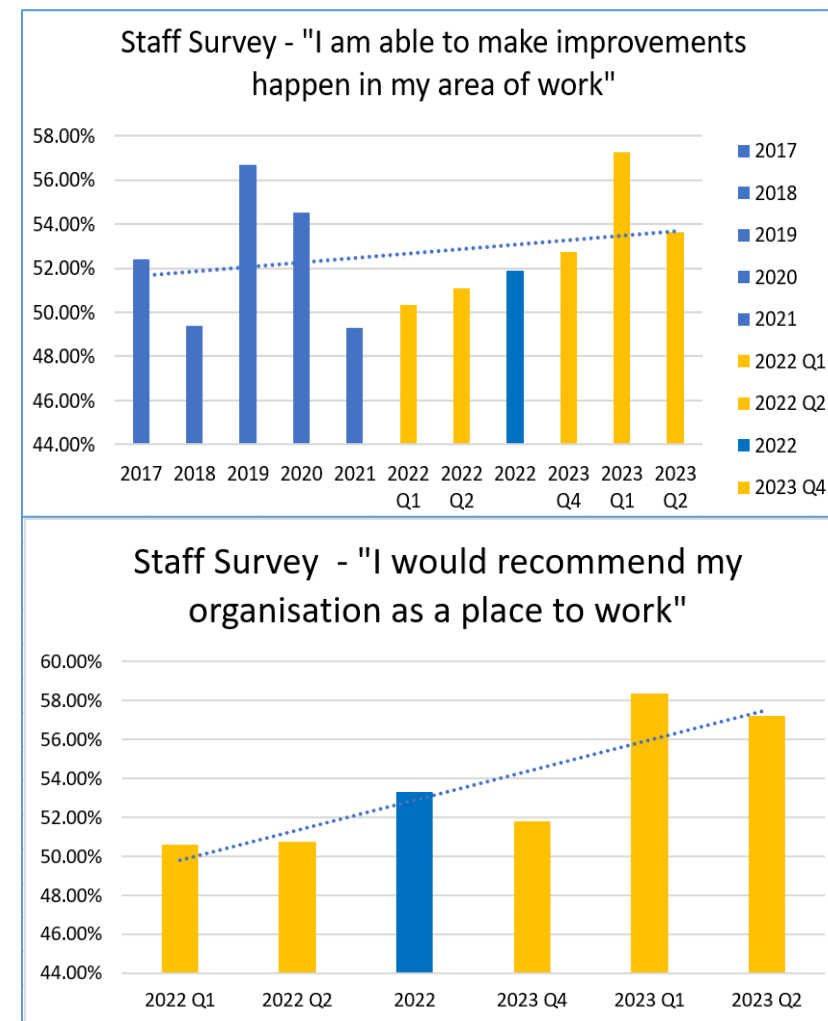
Areas to celebrate successes:

- Scored above the sector in “We work flexibly” (6.24). All four questions have improved and are ahead of the benchmark. In particular 71.4% of staff said they were comfortable to approach their manager about flexible working.
- Increases in the 4 scores in Compassionate Leadership: 68.5% said that line managers care about their concerns.
- Improvements in staff being understanding and kind to each other (71.5% vs 68.3% in 2021) and appreciate each other (68.4% vs 65.7%)
- Score for our Improving Together focus question “I am able to make improvements happen in my area of work” increased from 49.2% to 52.0% - this follows wide embedding of Improving Together methodology across Trust.

Areas for improvement:

How can we reduce work pressure felt by staff and look at how we can improve staff confidence in the standard of care we provide?

Results of latest National Quarterly Pulse survey show overall trend for following questions is up.



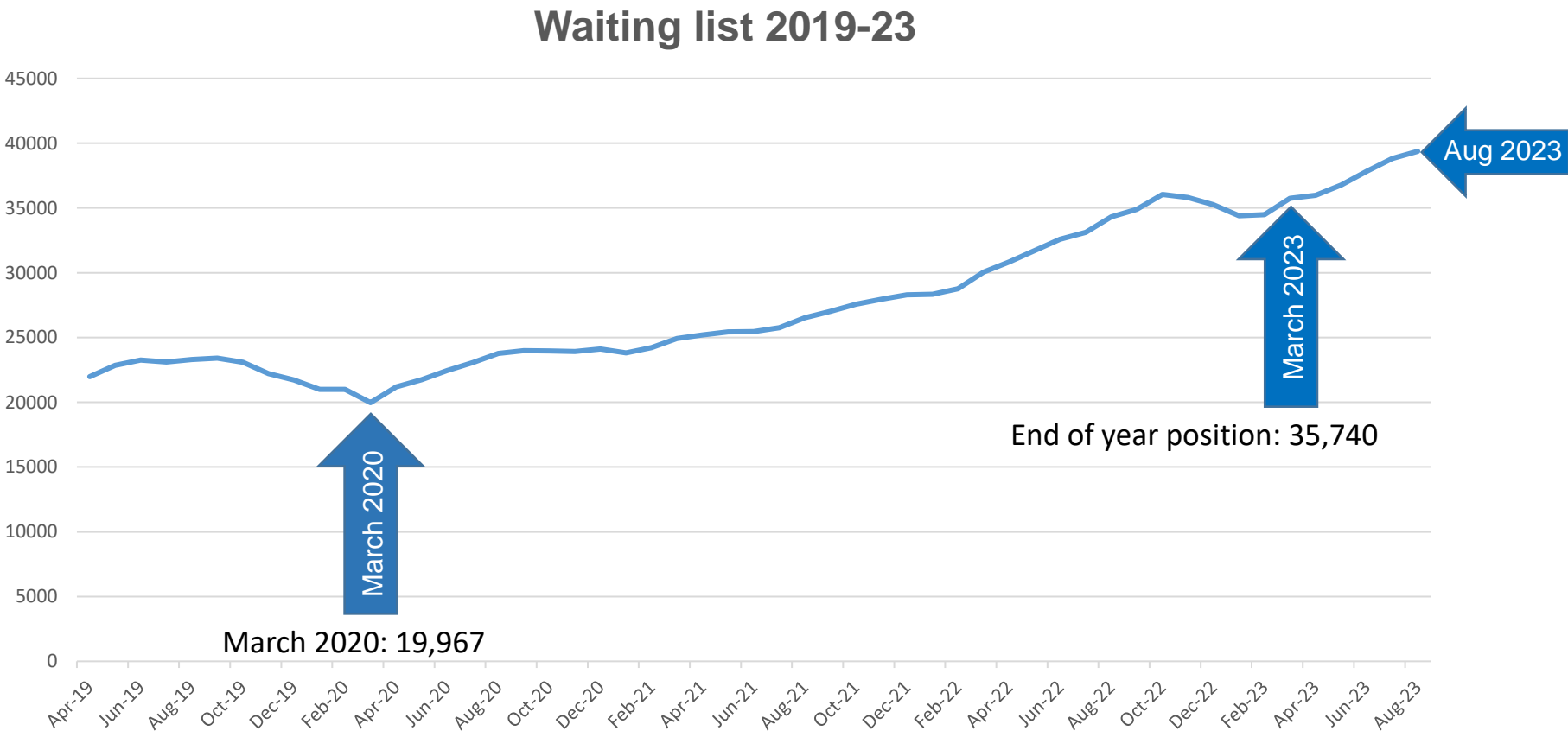
How we are performing

How we are performing

	2021/22	2022/23	Where are we so far this year?	National target
ED/UTC attendances	117,504	122,970	41,947 (Apr-Jul)	N/A
ED four-hour wait time, including UTC	76.9% (average)	74.6% (average)	75.0% (average)	95% of patients to be discharged or transferred elsewhere within four hours of arrival.
Waiting time for planned treatment	58.5% (Mar)	55.1% (Mar)	53.6% (Aug)	92% of patients to be seen within 18 weeks of referral.
Diagnostics (six-week standard)	54.3% (Mar)	56.1% (Mar)	49.4% (Jul)	99% of patients to receive a diagnostic test within 6 weeks of referral
Stroke Audit Score	C	B	Q1 not yet available	N/A * Q1 position
Cancer 2 Week Wait	90.6% (Mar)	89.2% (Mar)	59.7% (Jul)	93%
52 week waits	664 (Mar)	2159 (Mar)	2418 (Aug)	N/A Activity to deliver at 2019 levels
65 week waits	158 (Mar)	384 (Mar)	689 (Aug)	
78 week waits	47 (Mar)	2 (Mar)	3 (Aug)	

How our waiting list has grown

Elective recovery remains very challenging, with total waiting list now close to doubling from our pre-pandemic position. The current national standard is to have 0 patients waiting over 78 weeks, moving to zero patients waiting over 65 weeks by the end of March. We’ve set ourself an internal target to achieve this by the end of December.



Latest position

Total waiting list
End of Aug 2023 = 39,382

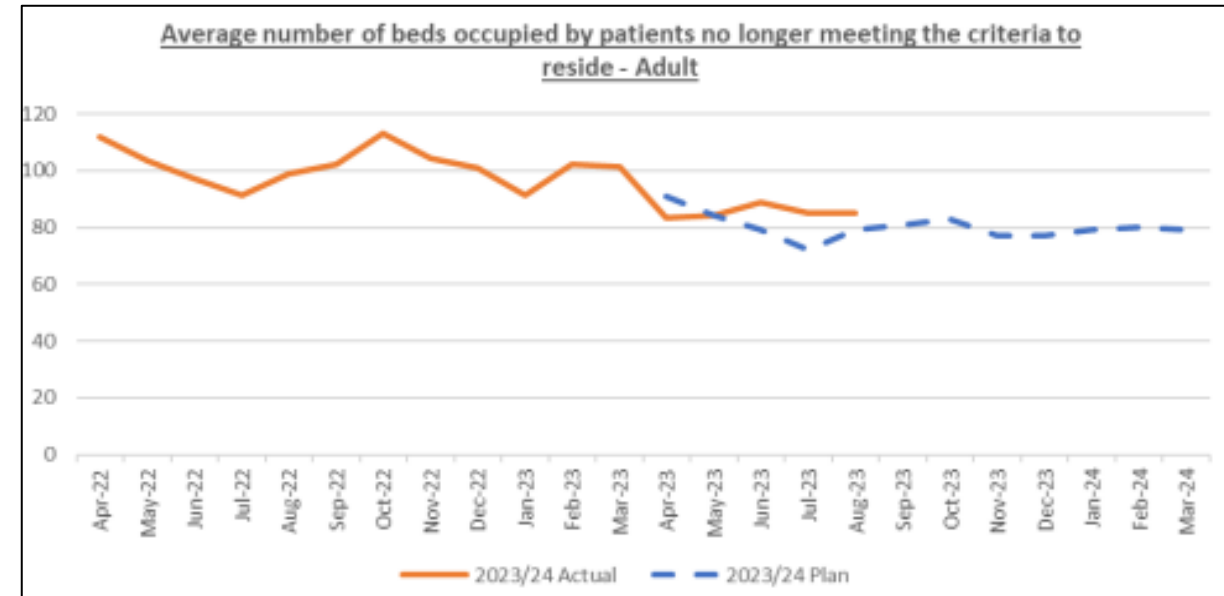
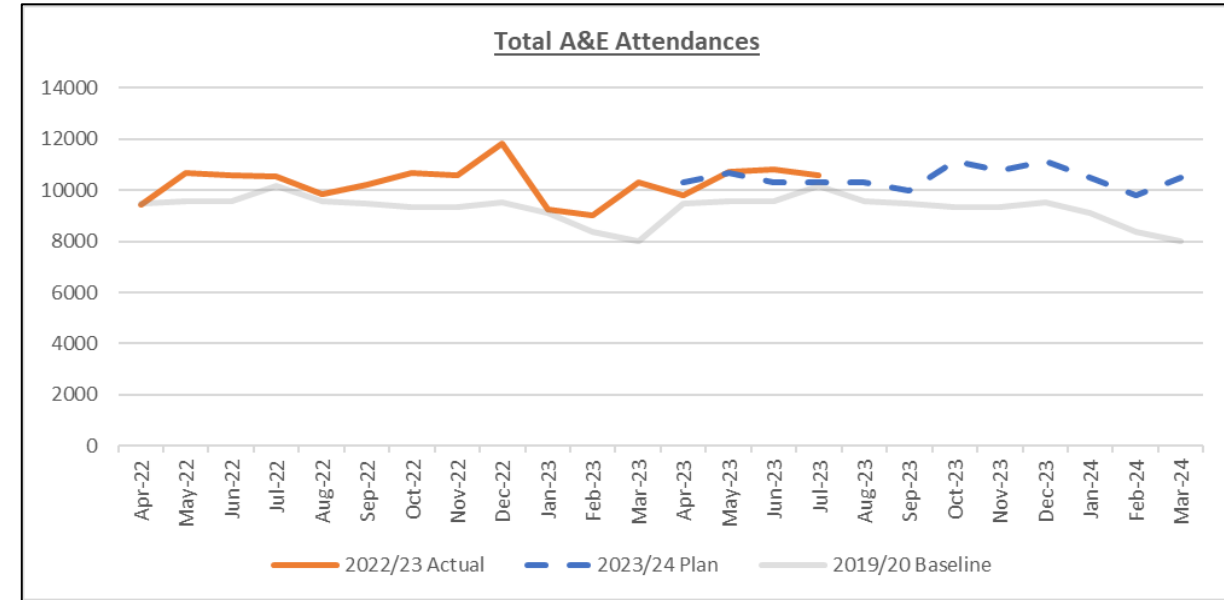
52 week waits
End of Aug 2023 = 2,418

65 week waits:
End of Aug 2023 = 689

78 week waits:
End of Aug 2023 = 0

The context we're operating in

- September very busy with high attendances in urgent and emergency care.
- We've seen good progress with patients with **No Criteria to Reside**, but this remains an ongoing challenge.
- Number of patients in hospitals for **21 days** or more is 14.9% – 5th best in the South West.
- **Bed occupancy** remains a challenge at 98.5% – the highest in the South West.
- **Ambulance handover delays** represent a risk to patients – we have a number of initiatives in place to help manage this.
- Continued challenges with access to **primary care** due to high demand across the system.
- **Covid** – remains an ongoing risk to both our workforce and patients, particularly with a new variant in circulation, with seasonal flu an additional risk. Waves of Covid have had considerable staffing impact in the past so current vaccination programme is key. Last year we were 5th in the country for Covid vaccination rates, and 8th for flu.



Industrial action

- We have been managing the risks associated with industrial action for almost a year with no end in sight.
- Considerable effort has been made by teams across the organisation to manage industrial action, and where we haven't been able to provide a safe service we have cancelled it.
- Patients have had their treatment delayed, some more than once.
- The impact on patient safety is not just about cancellations, but also activity not booked on known strike days.
- We have been rigorous in our oversight of the impact on patients, and must maintain this focus as the full impact of delayed treatment becomes clearer
- Although we have not yet seen a patient safety incident directly relatable to industrial actions, strikes present a real risk of people's conditions and outcomes becoming worse.
- Industrial action has also had an impact on staff morale, which will now be tested with the annual NHS staff survey having launched on 11 September.

Impact of industrial action

Total patients cancelled due to industrial action since December 2022 is **2,426**.

Of these, all have been re-booked apart from 355 patients who have not got new dates yet for various reasons, such as frequency of specialist clinics or the availability of patient themselves.

Financial cost is over £2.55m in current year. To the end of August the financial impact in the current year has been £1.4m of additional costs, together with a further £1.1m of lost income due to rescheduling and cancellation of appointments.

Future strategic developments

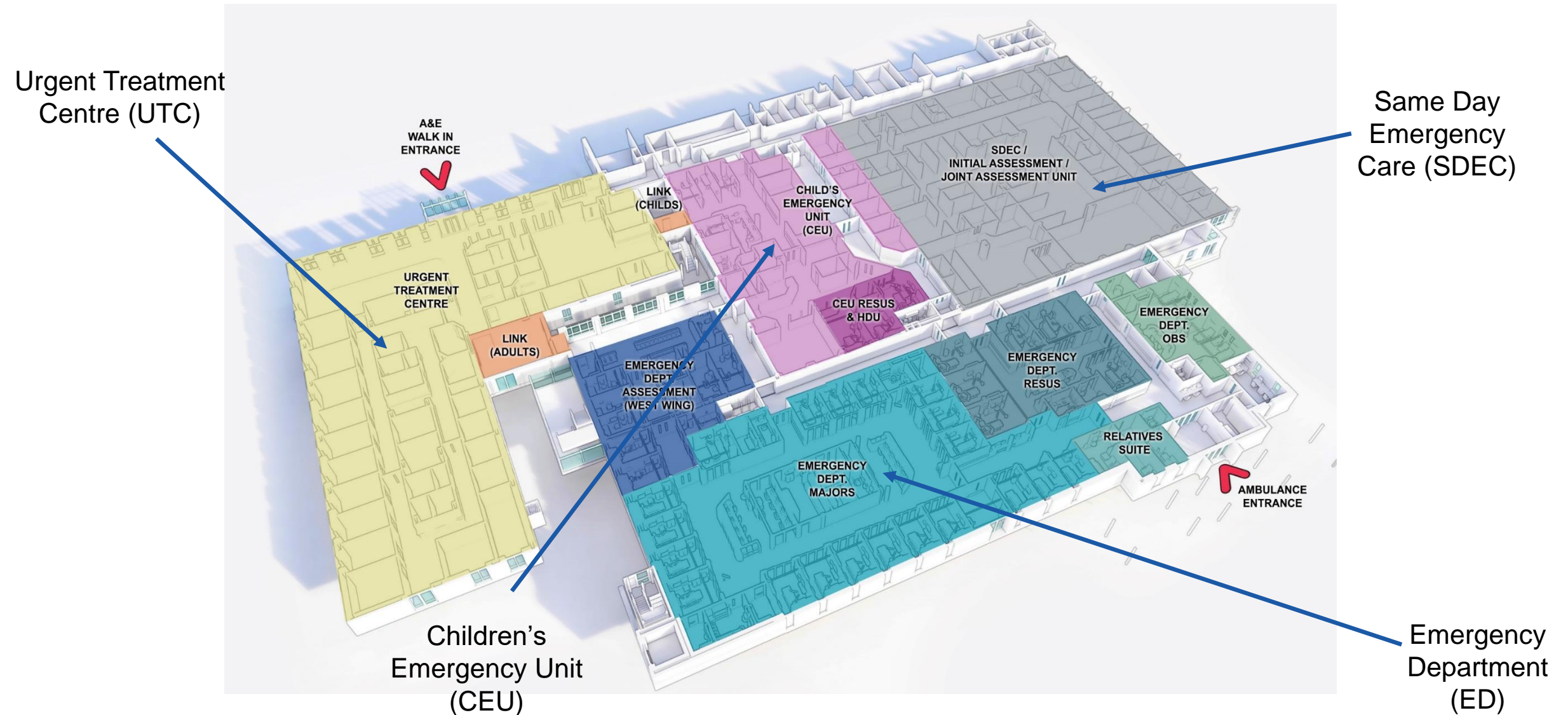
Integrated Front Door

Expansion of Emergency Department

- Related to two of our high scoring risks
 - Majors capacity
 - Ambulance handover delays
- Department of Health and Social Care, alongside NHSE, approved the full business case at national Joint Investment Committee earlier this year – meaning £26.3million of funding was released to the organisation for the £31.8m development.
- Construction work is progressing at pace – interior walls, windows and fixtures are being fitted in the new Emergency Department and refurbishment work is taking place in the existing space.
- In January, Emergency Department doors closed to the public, with patients entering through the Urgent Treatment Centre instead, where they are met by a clinical navigator to triage at the door. This is supporting education of other healthcare settings and ensuring patients are treated in the right place, first time.
- New urgent and emergency care expansion will see a brand new ED, a new Children's Emergency Department (bringing together paediatric ED and paediatric assessment unit) and improved Same Day Emergency Care capacity.
- Some services have moved during the construction work.



Integrated Front Door footprint



How this will improve patient care

- New Integrated Front Door will have two entrances, rather than previous four, making it easier for patients, staff and transport providers to access and be directed to the most appropriate service. This is already in place.
- Maximise and strengthen Same Day Emergency Care to reduce admissions and shorten length of stay.
- Maximise the number of patients who can be discharged within 72 hours through the provision of multi-speciality care and short stay wards. Discharge patients into community setting if the right service provision is available.
- Increase efficiency and improving rapid discharge through improved configuration and co-location of urgent and emergency services.
- Free up space in the main hospital for increased bed capacity, e.g. moving the current Paediatric Assessment Unit from the second floor to the ground floor.

We will improve
patient safety and
experience

We will reduce non-
elective admissions
(non-urgent)

We will reduce
12-hour ED waits by
50% and delayed
ambulance handovers
by 40% by spring 2025

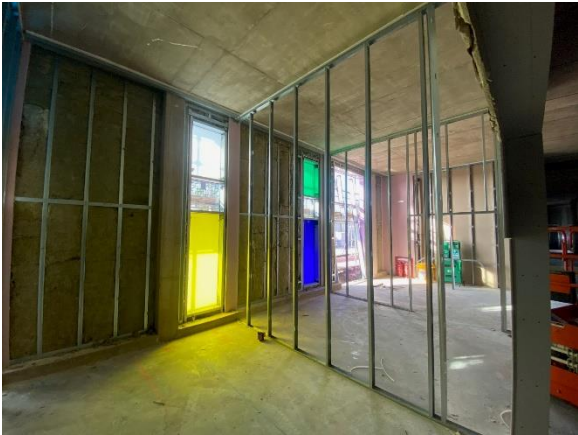
Engagement with stakeholders

- Robust engagement programme underway with key stakeholders:
 - Engagement Station created to give daily updates to urgent and emergency care staff
 - Ward walks conducted to update wider staff workforce
 - Sessions with specialist patient support services, including Learning Disability team, Dementia Admiral Nurses and Safeguarding team.
 - Public engagement sessions, including design workshop and construction progress meeting (Sept 2023)
 - Wider public engagement via local community networks and groups (Mind, Avon and Wilts Mental Health Partnership, Swindon and Wiltshire Carers, Swindon Blind Association, Mums on a Mission, Healthwatch etc)
 - Updates to partner organisations via forums, site tours and meetings
 - Site tours and updates, including NHS CEO Amanda Pritchard, other acute NHS Trust colleagues, local MPs and councillors.
 - Pre-occupancy data analysis with patients – over 300 responses



All feedback from engagement opportunities is being worked into the final designs, to ensure the new services best meet the needs of the population who will use them.

Timeline



Looking ahead

Our development as an extended leadership team and as an organisation has left us in a strong position to manage three very large-scale, complex over-lapping programmes of work, each of which has the potential to transform the care that our patients receive.

Integrated Front Door

By Summer 2024



Future of community services

By April 2025

Integrated Care Board is seeking to simplify a number of different community services contracts across BSW and align them to neighbourhoods and primary care networks and drive an expanded and transformed out of hospital system from April 2025.

Shared Electronic Patient Record

By Q2, 2026

In BSW, the three Trusts are committed to the procurement and deployment of a single Shared Electronic Patient Record platform. Full Business Case is with NHS England for approval. Go live plans for each Trust will be determined during contract negotiations with suppliers.

Moving forward

- We now face a **more complex set of challenges** than during the early stages of the pandemic, with the recovery proving difficult, no end in sight to industrial action, and a challenging financial situation meaning we have to find different ways to respond.
- We have strengthened our **leadership capacity and capability** and improved our systems, governance and processes to help us manage the challenges we face.
- Our **new strategy** will provide a clear direction and ambition for the organisation.
- We remain ambitious for what we can achieve with **significant investment** in our digital infrastructure and capability, Improving Together methodology, and our Integrated Front Door now on the horizon.
- We are **passionate** about improving the life chances of the population we serve.
- We are **proud** of the way our teams have responded to the ongoing challenges.
- As a leadership team we are absolutely committed to **doing the best possible for the people of Swindon and Wiltshire** – and so are our teams.

CEO – interim arrangements

- Kevin McNamara will leave Trust at end of year to become CEO of Gloucestershire Hospitals NHS Foundation Trust.
- Chief Medical Officer Jon Westbrook has been appointed Deputy Chief Executive and will be Acting CEO from 1 January.
- Chief Financial Officer Simon Wade will be Acting Deputy CEO from 1 January.
- Interim arrangements expected to be in place for at least six months.

Governors' Report

Chris Callow
Lead Governor

Membership update

Below is a summary of the membership information as of Thursday 24 August 2023:

- ✓ Public Members - 5,118.
- ✓ Staff Members - 6,489.
- ✓ Total Members - 11,512 **(increase of 95 members from 2022).**

All members are representative of the local community....there's more work to be done

How do governors represent you?

- ☐ Council of Governors' business meetings which are held in public.
- ☐ Appoint Non-Executive Directors and hold them to account for the performance of the Board.
- ☐ Appoint the Trust's auditors and receive a report on the Annual Report and Accounts and also the Quality Report.

Things we have done during 2022/23

We re-appointed one Non-Executive Director, appointed four Non-Executive Directors, and appointed two further Associate Non-Executive Directors.

Peter Hill, Non-Executive Director

Re-appointed in April 2023

Julian Duxfield

Joined Trust Board May 2023

Will Smart

Joined Trust Board April 2023

Claire Lehman, Associate Non-Executive

Joined Trust Board April 2023

Claudia Paoloni, Non-Executive Director

Re-appointed April 2023 – no longer Associate

Bernie Morley

Joined Trust Board April 2023

Rommel Ravanan, Associate Non-Director

Joined Trust Board April 2023

Governor appointments in 2022-23

	Constituency/Partner Organisation	Name	Elected/ Appointed
Partner Organisations	New College, Swindon	Leah Palmer	Jan-23
	Swindon Borough Council	vacancy	
	Wiltshire Council	Cllr Jane Davies	Dec-22
Public	Swindon Constituency	Ashish Channawar	Nov-22
	Swindon Constituency	Cecelia Olley	Nov-22
	Swindon Constituency	Raana Bodman	Nov-22
	Swindon Constituency	Judith Furse	Nov-22

Current vacancies

1 x West Berkshire/Oxfordshire/Gloucestershire/BANES

1 x Rest of England & Wales

Governor involvement in events

- ☐ Virtual and in person ward visits
- ☐ NHS Conferences
- ☐ Hosting Health Talks
- ☐ Attending opening of Children's bathroom (Lead Governor)
- ☐ Various Governor Training and workshops including Finance, Communications and ED&I
- ☐ NHS Provider Conferences
- ☐ Hospital Radio – Governor
- ☐ Active participation on Working Groups
- ☐ Questions at Council and Board Meetings
- ☐ Lesley Hemingway, governor and members made TikTok video

Looking ahead

- ☐ Continue to work with the Board to challenge and support performance.
- ☐ Contribute towards the development of 2022-2025 membership strategy.
- ☐ Ensure the Governor model is aligned, guaranteeing we are positioned correctly to fulfil the role effectively.
- ☐ Seek to understand the implications of Accountable Care Systems and the benefits to patients.
- ☐ Represent local people's views to inform decision-making.
- ☐ Continue to be involved in increasing membership.
- ☐ Work with the Improving Together team to work at getting the patient voice woven into all the work we do and sharing a film with our members.
- ☐ Work at involving members in the engagement plan.

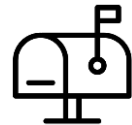
How to contact a governor



01793 605395



Gwh.foundation.trust@nhs.net



Great Western Hospitals NHS Foundation Trust
Marlborough Road
Swindon
SN3 6BB

- Thank you
- Any questions?