



What a year!

A review of the past 12 months



Looking back over an eventful and exciting year, there is no doubt that the considerable achievements we have enjoyed have been brought about by the outstanding staff we have in our Trust.

I speak for the entire board when I say that their dedication, professionalism, skill, attitude and sheer hard work are a tremendous

source of pride to us – a pride I sincerely hope is shared by the 300,000 people we serve in Swindon and the surrounding area.

The achievements of our team are all the more impressive as they have, at times, had to work under enormous pressure in a year which has seen record numbers of patients in A&E, a concerted effort to achieve financial break even and the opening of a brand new treatment centre.

We do not take their effort and commitment for granted and we paid close attention to our staff survey which gave us a clear view of what our staff thought of the organisation and enabled us to make improvements where possible.

Also of great importance to us is patient safety and I am delighted to be able to report that we obtained the Clinical Negligence for Trusts Level two award. We were also the first Private Finance Initiative hospital ever to win the British Safety Council's prestigious top award of five stars with a rating of 97.8%.

In a year when MRSA was headline news, we had a low hospital acquired infection rate. It is important that when patients, staff and visitors come into hospital, they are as safe as possible and the hard work carried out throughout the Trust to combat infection, particularly in the field of hand hygiene, has been impressive.

During the last year we welcomed two new non-executive directors in Lesley Bennett and Angela Gillibrand and they have both settled in very well. Staff have welcomed them warmly and I would like to thank everyone who has taken time out to brief our new members and to help them settle into the team here.

Many of our staff work in the community alongside other organisations such as the Children's Trust, Social Services and Unscheduled Care. It is essential that our services work smoothly together and that we receive the continued support of the local population for our service.

The support and understanding of our patients and the public cannot be underestimated in terms of staff morale and we greatly appreciate all the positive comments and constructive suggestions we have had which inspire us to strive to provide an ever better service and make genuine improvements to the care we provide.

When I took over the role of Chair in February 2004, I quickly became immersed in this Trust. It is a fascinating place to work and I greatly value being part of an organisation that provides such important services. It is essential that in the coming year we develop these services.

Patsy Newton, Chair



This has been a very challenging and busy year in which we made major changes to develop and improve standards of health care. This has only been possible with the support, commitment and hard work of all our staff and those organisations who work closely with us.

Our prime aim has been and continues to be, to ensure

that all our patients receive the highest standard of clinical care, in a safe, clean and pleasant environment, from staff who are well trained and who treat individuals with care and compassion. The positive feedback from our patient and staff surveys were above the national average and our performance, as assessed by the Health Care Commission, meant that we retained our two star rating.

The past year has seen major changes and improvements which have affected large numbers of patients. The successful commissioning of the Brunel NHS Treatment Centre provided more space to treat more patients, increasing beds by

128 and a further five operating theatres so we can continue to reduce waiting times. There is a danger that in listing our achievements those seemingly small but really significant improvements made by individual members of staff and by teams working well together are overlooked. It is these that also make a real difference to patients and their carers. Our hospital open day generated a great deal of interest and support from the public and I know, by talking to patients and from the many thank you letters that we receive, that excellent care is being provided and change and improvements are happening throughout our services.

Looking to the future, there are many national policy changes which will affect our services. We do not want to just meet the national standards but exceed them, so when patients need treatment they choose to come to us because they are able to access all our services promptly and have confidence in the care we provide. We need to ensure that our Treatment Centre is used to its full potential and the establishment of a new academy will enable us to train many more doctors and nurses locally.

The year has been a good one. But we are not complacent. We need to ensure that excellent standards of care are consistently delivered and we exceed the national targets so that our community continues to have confidence in their local health service.

Lyn Hill-Tout Chief Executive.



The main entrance of The Great Western Hospital at night.



Your New Treatment Centre

by Trevor Payne, Director of Estates and Facilities

The first patient was admitted to our brand new, state of the art, Brunel NHS Treatment Centre in April 2005.

The 128 bedded unit, built under the private finance initiative with our partners The Hospital Company and Carillion Building, was designed specifically to deal with elective surgery, the aim being to free up the Great Western Hospital to handle the growing number of emergency admissions.

The extra beds have given the Trust extra capacity and flexibility and the new Treatment Centre will be a huge boost to the healthcare facilities in Swindon and surrounding area in the coming years.

The past 12 months have seen a tremendous amount of activity on the site as the Brunel NHS Treatment Centre has taken shape.

There has been the commissioning of all of the building services, wards and departments within it, and finally mobilisation and operation of the unit. A first class building has been delivered that will offer excellent elective (planned) care services, provided in a purpose built environment. A carefully chosen colour scheme is based upon a water theme with ward names being named after rivers and tributaries found within the Swindon locality.

From the moment you enter the front door of the Treatment Centre there is a real sense of arrival, with hotel standard quality provided in the main entrance with its excellent quality fittings and finishes and a snack bar/restaurant which any high street coffee shop owner would be proud of. A feeling of space, clear signposting and lifts, all make it easier to move around between levels and the wards and departments.

State of the art operating theatres offer excellent facilities for staff and patients and following the patient journey, the ward space offers a high

quality, excellent patient environment in which to be treated. This is clearly a building that the Trust and Swindon residents should be proud of.

As the Treatment Centre was built adjacent to the existing hospital, next door to Operating Theatres, Delivery Suite, Radiology and a functioning ward, the construction activities were sensitively managed in order to keep any impact on the functioning of the hospital to an absolute minimum. This was a minor miracle considering part of the scheme involved cutting holes in the side of the existing hospital in order to attach the link bridge access, affecting four levels of the hospital.

A commissioning team managed by the Trust Project Manager, worked closely and collaboratively with Carillion to ensure that equipping and mobilisation went smoothly and seamlessly and lessons and experience learned from the move to The Great Western Hospital were identified and acted upon to improve the overall process.

Following completion of the moves into the Treatment Centre, a secondary project was conducted to back-fill the space created in The Great Western Hospital as a result of the internal moves. Over 160 work station moves and office relocations have taken place to date, with the aid of IT, the Equipment Team and Estates and Facilities.

Crow-munication

Promoting the new treatment centre to the public and to staff was an important part of the development.

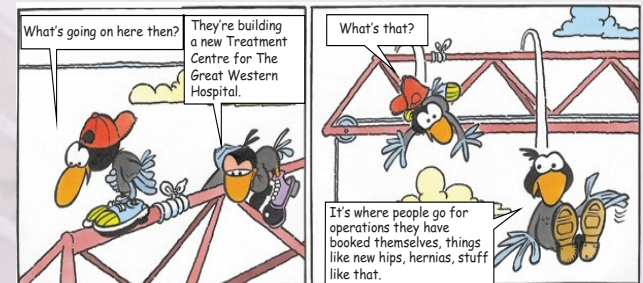
With so many leaflets and brochures about, the project team decided if they were to catch people's attention they needed to take different approach. So they enlisted the services of top cartoonist David Mostyn from Oxford who helped to create "The Crows", two chirpy characters who explained in simple language, what the new

FACTFILE

The name "The Brunel NHS Treatment Centre" was chosen by the readers and listeners of our local media after a shortlist of suggestions was drawn up by Trust staff.

The treatment centre has:

- 3 x 36 bedded wards
- 33% single rooms
- 5 operating theatres
- 108 beds for elective surgery
- A 20 bedded private unit, The Shalbourne Suite
- Power, oxygen and medical gases piped to each bed-head
- Access from all beds to the Patientline entertainment and communications system
- 500 miles of wiring
- 5000 sq metres of concrete
- 1180 panels
- 680 tonnes of steel.



treatment centre was all about. The Crows appeared in comic style leaflets, on posters and were even animated on the Trust's website.

Thousands of copies of the leaflet were distributed to supermarkets, libraries, NHS premises and other outlets all over Swindon and the surrounding area and a second issue was produced especially for staff, to keep them up to date with developments in the weeks leading up to the opening of the Treatment Centre.

Café Bleu

In April 2005, Café Bleu was opened in The Brunel NHS Treatment Centre by Chief Executive Lyn Hill-Tout. This is a joint venture between our private sector partners Carillion and Starbucks Coffee and is a facility for staff, patients and visitors. It offers a range of coffees and beverages and a menu of meals and snacks and has already become a firm favourite.



Lyn Hill-Tout "behind the bar" at the opening of Café Bleu

Nice to meet you



Our second open day, held on Saturday 26th February 2005, proved a huge success, drawing around 2,500 visitors to the hospital. Everyone who took part was delighted to see so many members of the public and staff bringing their family and friends to look around.

The day was officially opened by the burying of a time capsule beneath a courtyard in the new Brunel Treatment Centre by Trust Chair Patsy Newton (left) and Chief Executive Lyn Hill-Tout.



The BBC were on hand throughout the day.

Although more about giving the public a chance to see how the Trust works, the day also proved to be quite a moneyspinner with around £600 being raised for Trust funds. The Ear Nose and Throat department raffle alone raised £329 which will contribute to their new equipment Patient Information System

Trips around the new Brunel NHS Treatment Centre proved popular and around 400 people took one of 21 tours around the new building which included wards, theatres, recovery and other facilities.

Singing surgeon John Cullimore with his musical partner Nick Weaver entertained the crowds throughout the day whilst face painting and other activities by Buffer Bear staff, who run the Trust's on site nursery, kept the youngsters busy.



Singing surgeon John Cullimore (right) entertains the crowd.

The infection control team had a bit of fun with hand hygiene by running a competition to see who could get their hands cleanest. Visitors to their stand were invited to see how clean their hands were after washing them using the ultra violet light box. Out of 167 hands washed 49% washed their hands to an acceptable standard.

The IT department showed the public how technology plays a vital role in a modern hospital and departments from ICU to Obstetrics, Oncology to Audiology were on hand to explain their roles to visitors.

There was a stand run by the fire prevention team and the Trust's volunteers took the opportunity to explain how they have become such a valuable part of the Trust's team.



WRVS members with a cuddly raffle prize.

Staff entered into the spirit of things in a variety of ways. Senior Sister Val Mortimer wore her uniform from the 1980s to show how times have changed in terms of how nurses look and a number of wards and departments opened their doors to allow the visitors to see a working hospital.



Val Mortimer (right) in her old uniform.

Hospital art was showcased with a striking video display and the Trust's occupational health team who look after the welfare of staff were on hand to provide "lifestyle checks".

Demonstrations by Resuscitation Training Officer Jon Taylor were popular as was the Indian head massage.



Jon Taylor demonstrating resuscitation equipment.

It was very much a day for the public and there was media coverage throughout the event. The Public and Patient Involvement Forum were on hand to explain how they provide a link between the hospital and the community and Hospital Radio had roving reporters conducting interviews with visitors and exhibitors alike.

Chief Executive Lyn Hill-Tout said: "It was a fantastic day and a real tribute to everyone who took part and to the team who organized the event. The turnout was terrific and the interest shown by all those who turned up made the huge effort by everyone involved well worthwhile.

"A hospital is very much at the heart of a local community and the public response shows just how much interest our community has in their hospital and how much the efforts of the staff are appreciated. "



WHO WE ARE AND HOW WE CARED

Our Board

The board of Swindon and Marlborough NHS Trust in alphabetical order with a list of each member's interests and associations.

NAME	INTERESTS
John Adey, <i>Non-Executive Director</i>	Shareholder – Aldbourne Nursing Home. Chairman of Governors, John O'Gaunt School, Hungerford
Lesley Bennett, <i>Non-Executive Director</i>	Non-Executive Director, Wessex Water Services Director, Malmesbury River Valleys Trust. Director/Trustee, SAVAGE Trust. Council for Voluntary Service North Wilts Chair of Governors, Luckington Community School Member of Wiltshire Courts Board
Paul Bentley, <i>Director of Human Resources</i>	Paul's wife is a senior employee of the National Institute for Clinical Excellence
Rowland Cobbold, <i>Non-Executive Director</i>	Honorary Treasurer, Ogbourne St George Parochial Church Council
David Davies, <i>Director of IM&T</i>	None
Angela Gillibrand, <i>Non-Executive Director</i>	None
John Henson, <i>Medical Director</i>	None
Lyn Hill-Tout, <i>Chief Executive</i>	None
Charlotte Moar, <i>Director of Finance</i>	Trustee, Bristol Zoo
Patsy Newton, <i>Chair</i>	Board Member, Ridgeway Housing Association (Aster Group) Member, Cirencester Housing Society
Trevor Payne, <i>Director of Estates & Facilities</i>	Retained estates & facilities consultant for Biocite Ltd
Sue Rowley, <i>Director of Operations</i>	None
Kevin Small, <i>Non-Executive Director</i>	Director, New Swindon Company Director, Swindon Historical Railway Trust Councillor, Swindon Borough Council Member, Even Swindon Working Mens' Club Member, Swindon & District Referees Association Shareholder/Member, Oxford, Swindon & Gloucester Co-operative Society Shareholder, Friends Provident Ltd
Francesca Thompson, <i>Director of Nursing</i>	Board Trustee, Age Concern Swindon

Fact File

In 2004/05 the Trust treated 8,018 inpatients, 17,106 daycases and 21,416 emergency admissions. We saw 242,443 outpatients, 60,987 patients attended the Accident & Emergency Department plus 3,394 babies were born. Overall, the Trust treated more inpatients in 2004/05 than in the previous year.

The activity for 2004/05 over the previous year activity was:

- Emergency inpatients – increased by 2.1% (440 patients)
- Elective Inpatients – increased by 3.7% (289 patients)
- Daycases – increased by 12.1% (1,850 patients)
- New Outpatients – decreased by 3.4% (2,263 patients)
- Follow up Outpatients – increased by 0.6% (1,011 patients)
- A&E Attendances – increased by 4.9% (2,857 patients)

The Trust endeavours to offer all patients referred with suspected cancer an appointment within 14 days of the GP referral. In 2004/05 the Trust offered 99% of patients an appointment within 14 days.

Waiting times have reduced as the Trust works towards reducing waiting times of six months for inpatient and daycase surgery and 13 weeks for an outpatient appointment by December 2005. The numbers of inpatients waiting over 6 months has reduced by 60% between March 2004 and March 2005 and the number of outpatients waiting over 13 weeks has reduced by 50% between March 2004 and March 2005.

The Trust has reduced the number of patients on its waiting list. At the end of March 2005 we had 5,596 against a target of 5,840.

Performance in A&E has also improved over the year with the target increasing from 90% of patients to be admitted, discharged or transferred within 4 hours to 98% from January 2005.

The Trust has been awarded two stars, maintaining the same star rating since 2000/01.

£300,000 bonus for A&E

A superb team effort meant that we were able to meet the Department of Health's targets for four hour waits in A&E – and collect £300,000.

Staff throughout the Trust worked hard to ensure that we had the beds and resources available to enable us to ensure that patients coming into A&E were assessed, admitted, transferred or discharged within four hours. In June 2004, the target figure was 95% which we met and by September we had improved our time to the 96% target.



At the time of going to press our times had improved further to 98%

About our Trust

The Trust provides health services from The Great Western Hospital in Swindon, which is a district general hospital, and Marlborough House, our child and adolescent mental health unit which is in Old Town, Swindon.

Our staff also provide care at Savernake Hospital in Marlborough, Swindon Intermediate Care Centre (SwICC), Langton House, Wick House and the Montgomery Suite at Badbury Court. We also have staff who work in the community and at the Marshgate Rehabilitation Centre in Swindon.

Swindon and Marlborough NHS Trust was formed in 1994

It employs 3,300 staff

It serves a population of approximately 300,000

Our annual turnover is £132million

We have a management of equality and diversity policy which considers the needs of disabled employees and we have a double tick approval from the Department of Employment and Education to show that we meet their criteria for employment of people with disabilities. The policy also covers issues of race and gender.

We are committed to an equal opportunities policy which incorporates the Human Rights and Race Relations Acts, aiming for equal opportunity and fair treatment of job applicants, employees and the public, irrespective of gender, ethnicity or disability. We are committed to the Code of Practice on Openness in the NHS" and make ourselves accountable to the public by holding all our board meetings in public and holding a public annual general meeting. We also publish an annual report, audited accounts, a register of board members' private interests and operate a thorough complaints procedure. Since January 2005 we have conformed fully with the Freedom of Information Act, receiving 54 inquiries in the first six months of the year, all of which received a response within the 20 working day deadline.



CARING FOR OUR STAFF

A year of preparation

Much of the year was spent preparing for the opening of the new Brunel NHS Treatment Centre. This involved recruiting staff to the additional posts that were created and the transferring of existing staff to their new bases. Whilst we still have some shortfalls in areas like theatre nursing and orthopaedic surgeons, the preparation was mostly successful, with a smooth transfer in April 2005 of existing staff and the appointment of new staff.

The first annual staff survey by the Healthcare Commission, saw the Trust featuring in the top 20% of Acute Trusts across England. It did not feature in the lowest 20% in any area. It is important to gauge the views of our workforce and ensure that we are providing an environment and appropriate support for all of our staff.

We continued to prepare for the introduction of the Educational Academy. During the year we welcomed medical undergraduates from Bristol University for the first time and will see a major increase in this from September 2005. The ability to recruit and retain our staff is heavily influenced by the presence on site of medical and nursing undergraduates who, become part of our substantive workforce. This is an exciting development that we anticipate will continue to bear fruit, as we build up to full student numbers. Continued collaborative working with the University of Bristol, University of Oxford, Oxford Brookes University and the University of the West of England has allowed this development to take place.

Financial pressures were a key issue, and we saw a significant reduction in our dependence on temporary staff. This is important in terms of the quality of care as it is much better for a patient to be cared for by a permanent member of staff who knows the clinical area in which they work. Increased scrutiny of the numbers of vacancies, the numbers of temporary staff and their best use, has at times led to pressures on clinical services but played a major part in ensuring that at the end of the financial year the Trust broke even.

Finally 2004/2005 further demonstrated the hard work and diligence of all our staff in ensuring that our patients received the best possible care. This is a suitable opportunity to thank them for their huge contribution during the year.

Paul Bentley, Director of Human Resources

Clear Agenda

Agenda for Change is the biggest change to the pay of NHS staff for 50 years and will apply to all staff directly employed by NHS organisations in the UK except doctors, dentists and some of the most senior managers. It aims to ensure fair pay and conditions of service for NHS staff, lead to improved career opportunities and greater rewards for those who take on more demanding roles.

The new terms and conditions started to be introduced from 1st December 2004 effective from 1st October 2004.

The pay reform package includes:

- A new NHS job evaluation scheme applied to all posts within the Trust.
- Development and appraisal for all staff with pay progression linked to the demonstration of applied skills and knowledge.
- Conditions of service, which currently vary widely between staff groups, will be harmonised, including annual leave and full time hours.
- A clearer and more consistent system of rewarding staff who work flexibly outside normal hours.
- Flexibility for recruitment and retention premium, on top of basic pay.

At the end of July 2005, 1200 staff had transferred to the new pay and conditions, with the rest being transferred during August, September and October 2005 ensuring we hit the target set by the Department of Health.

An academy for the future

There is a strong commitment to education, training, research and lifelong learning in Swindon and North Wiltshire amongst health and academic partners. These partners have now created the infrastructure to support the provision of education, training and lifelong learning of all staff involved in healthcare in Swindon and the surrounding area, building on a strong base of existing activities and partnership working.

The concept of an Academy has been developed over the past year. The Academy will be a multi-professional, multi-disciplinary educational faculty run by professionals from organisations across higher education and the NHS.

The current Education Centre at The Great Western Hospital, whilst continuing to offer a range of training and development, has been preparing to house the Academy in September 2005. The intention of the Academy is to maintain and increase the supply of suitably skilled staff to deliver modern and effective health care by providing local training.

It will enable staff and students from all backgrounds to develop together the knowledge and skills required to deliver this healthcare to the highest possible standards.



Education Centre staff looking forward to the opening of the new academy.

Fact File

- Number staff employed 3204 (2410.78 WTE)
- Joiners 453
- Leavers 505 (variance in leavers is due to termination of bank staff contracts of those no longer actively working via nurse bank. Starters and leavers through year indicate stable trend)
- Thirty-two people have received a long service / retirement (over 20 years service) certificate over the last year from April 04. Eleven since Jan 05, and 21 from April 04 – end of December.



Trust Values

As a Trust we:

- Will develop and deliver excellent, clinically effective and safe care, providing the highest levels of safety for patients and staff
- Will put patients at the centre of all our decisions
- Will continue to improve patients', carers' and other users' involvement, experience and satisfaction
- Will be honest, open and accountable
- Will create an open, supportive environment in which everyone is:
 - Freely able to express ideas and views
 - Raise concerns and learn from mistakes
- Will maximise the potential of all our staff
- Will create an environment in which excellence can flourish and in which we continuously improve the quality of care
- Will work together with other agencies and our communities in the best interests of patients, carers and users
- Will ensure our decisions are sustainable and leave a positive legacy for future custodians of health care and the wider community

The Ten Year Vision

In 10 years the Trust will:

- Provide consistently high quality, effective patient care which meets and exceeds expectations, as measured by the patient's experience
- Be a model employer, maintaining a highly motivated and professional workforce
- Perform in the top 10% of health care providers, across a range of clinical and non-clinical indicators and in certain areas we will have "services of excellence" which will undertake research
- Be a creative and innovative organisation, providing a leading-edge learning and teaching environment with advanced evidence-based service development capabilities
- With other partners we will provide integrated services to our communities, providing the right care, in the right place, at the right time.



The value of volunteers

By Su Maddocks, Community Liaison Manager - Voluntary Services



Su Maddocks receiving the Investors in People Award.

The last 12 months have been a busy yet exciting time within Voluntary Services. We saw a steady rise in the number of people, especially students, wanting to get involved in their local hospital through volunteering.

2005 was identified as the National Year of the Volunteer with January dedicated to volunteering in health settings. We saw this as the ideal time to launch our first ever glossy booklet about our volunteers and this has been distributed widely both within the hospital and the wider community. This led to another rise in interest in volunteering for the Trust and resulted in a waiting list. Although not an ideal situation, it was imperative that despite wanting to accept every offer, recruitment had to be managed both safely and effectively for all concerned.

Despite this, the culmination of the efforts of the team was attained in April when Voluntary Services achieved the Investor in People standard, in it's own right, with the formal presentation taking place in June during National Volunteers week. In all a wonderful and successful year, achieved largely by the generosity and commitment of our tremendous team of volunteers.

In tune with our patients

By David Penfound, Hospital Radio

Hospital Radio, Swindon (HRS), is a voluntary charity dedicated to providing a 24 hour service of programmes (Patientline channel six) for patients at The Great Western Hospital.

Programmes over the past year have included sports commentaries, patient request programmes and live performances by local choirs in the Atrium such as the Kentwood Choir. Singing Surgeon John Cullimore will perform in September and a local school choir in December.

Partners in healthcare

By Neil Sutherland, FM Services Facilities Director, Carillion Health

Innovations this year have been the opening of the staff restaurant Bookends enhanced by catering manager, Brian Pearson's imaginative menu 'specials'. The Treatment Centre's Café Blue with Starbucks coffee has proved a great hit too, by popular request a morning trolley round has now started. Many of our services take place quietly behind the scenes, the Help Desk takes 1,500 calls a month, while the switchboard staff deal with over 50,000 calls a month. In housekeeping, we appointed a patient catering specialist to ensure excellence in ward catering and on 1 July, we changed food suppliers and the benefits of selected elements of the Better Hospital Food programme are being well received by patients.

Our support to the Matron's Charter and other infection control initiatives has been well received and we are trialling a micro-fibre cleaning system in the Brunel Treatment Centre to try to reduce hospital acquired infections to a minimum. In our busy portering department, a trial of extra porters in Accident and Emergency was so successful that they have been permanently appointed to help A&E meet its demanding time targets. The hospital's complex engineering systems continue to keep the Estates team busy. Our security team continue to protect staff, patients, visitors and property. We look forward to supporting the Trust and its patients and visitors in 2005/6.

Looking back over a busy year

A look at just some of the ways we worked to improve care, services and facilities during the year in the words of those "at the sharp end"

A year of improvements

By Trevor Payne, Director of Estates and Facilities

Marlborough House, our child and Adolescent Mental Health Unit in Old Town, has had some significant improvements made to building security this year. Shredders have been introduced into wards and departments in order to shred confidential waste at source to reduce costs and support recycling initiatives. Several projects have also been undertaken to improve energy efficiency and consumption on site this year.

The vacated Clover Ward by the West entrance of the GWH will in part be adapted to accommodate the PCT's Out of Hours service on site. Siting this service in Clover will ensure that patient flows are correctly managed and streamed to ensure that A&E services are used appropriately, resulting in better use of A&E facilities and assisting with triage and wait times.

There have also been a number of significant improvements and projects during the year regarding services such as cleaning and catering, leading to improved patient satisfaction and reduced numbers of complaints.

Expanding the team

By Francesca Thompson, Director of Nursing

This year we have seen an expansion in both the size and skill base of our nursing and midwifery workforce. It has been a particular success to see our largest student nurse intake to date, graduating and then choosing to work at The Great Western Hospital. I am very proud of the team of Senior Nurses, Modern Matrons and Ward Managers who continue to be completely dedicated to carefully selecting the best nurses to care for our patients.

All members of the multi-disciplinary team, be they therapists, midwives, nurses, doctors or pharmacists, continue to set themselves a challenge within the demands of a very busy hospital and that is to work tirelessly towards improving the standards of care.

The Quality Improvement Awards have been won this year by nurses and excellence in care has flourished in areas such as the Montgomery Suite and Marlborough House where working alongside patients, families and carers nurses are recognised as being in the forefront of understanding what issues matter most.

A successful implementation of the Matrons' Charter has ensured focused and sustained achievements in many areas of care including the cleanliness of wards and a more responsive service at meal times.



Francesca Thompson (third from left) with some of our modern matrons at the launch of their charter.

The technology of care

By David Davies, Director of Information Management & Technology (IM&T),

Our two main services; Health Records and Information Technology (IT) affect all aspects of the Trust and are integral to the Trust's ability to provide safe, efficient and effective healthcare to patients.

High points of the last year include our contribution to the opening of the Brunel Treatment Centre, and our key role in supporting the new Academy by providing IT links to the higher education institutions that will be providing educational services and a video link to our operating theatres.

Patient records – which are increasingly available in electronic format – are an essential part of healthcare. The Trust is fortunate to have a widely used Patient Administration and Electronic Patient Record (EPR) system. We successfully piloted access to this system by local GPs and we are now rolling it out to all GP practices and other health facilities, in Swindon and eventually to GPs in surrounding areas.

Much of our work supports the Trust's clinical services and we have helped provide new systems or upgraded services to clinical areas as diverse as Pathology, Radiology, Infection Prevention and Control, Theatres, Cancer Services, Cardiology, HSDU, Pharmacy and Rheumatology. We have recently introduced a Positive Patient ID system supporting the safe treatment of patients.

The role of the clinical coding team has increased significantly with the introduction of the Payment by Results (PbR) initiative, (where Trusts are paid for the work they actually do) and we play a large part in meeting our new obligations under the Freedom of Information Act.

Our increasing focus will be on the National Programme for IT "Connecting for Health". We have a well established electronic referral system, used widely by local GPs, and we are working closely with colleagues in the local health community to build on this to support the local implementation of the national "Choose and Book" programme which will increase the choice options and ease by which patients can book their hospital appointment.

Superb staff retain two stars

By Sue Rowley, Director of Operations

The Trust was again awarded two stars in the national performance ratings.

Challenges during the year included increased numbers of patients in A&E and the opening of the new Brunel NHS Treatment Centre.

We are very proud of the team here who have done a superb job throughout the past 12 months. Yet again they have shown a dedication, professionalism and commitment to our patients which does them enormous credit. We are also delighted by the support we have had from our private sector partners Carillion who have made a significant contribution towards us achieving the two star award.

The star ratings, published by the Healthcare Commission, measured the performance of NHS Trusts throughout the country covering the year ending March 2005. They examined key targets in areas including A&E waits, hospital cleanliness and cancer treatment times. They also appraised our performance against standards which looked at issues such as child protection and care provided to stroke patients. The patient focus section of the assessment measured areas such as hospital food, delayed transfers of care and cancelled operations. The ratings also looked at issues raised in the annual staff and patient surveys.

The two star award means that the Trust is performing well overall but has not quite reached the same consistently high standards across the board, although some areas have shown improvements on last year. The Trust met every one of the key targets with the exception of the one requiring the total time for patients in A&E to be four hours or less.

The A&E target was very disappointing as we had done so well throughout 2004 but an incredibly busy period between January and March 2005 meant that it became very difficult to achieve a 4 hour waiting time on our very busy days, especially the days when we had few beds to admit patients into. Our performance has now improved and all staff are working hard to maintain it.

Some of the highest areas of Trust performance were in hospital cleanliness and hospital food, few cancelled operations which brings benefits for patients, and compliance with child protection requirements which is an area of priority us as a Trust.

However, areas where we need to improve include a speedier response to complaints, swifter care for cancer patients, and improved stroke services.

Caring about your care

Our Patient Advice and Liaison Service (PALS) had a busy year answering your queries, and listening to your comments, concerns, complaints and compliments.

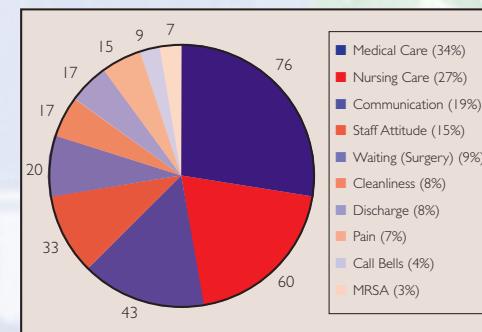
An area for improvement this year is to provide speedier responses to complaints. This is lower than we would like and plans are in place to ensure we respond more quickly.

There were almost 1500 contacts with PALS during the year and one in 10 of those was to pass on a compliment, complaints almost halved whilst the number of general enquiries increased.

FORMAL COMPLAINTS ANNUAL SUMMARY

- There were 221 formal complaints received during the year compared with 408 during the previous year. This is an overall decrease of 46% from 2003 to 2004.
- The Trust undertook a total of 405,245 patient episodes in 2004 to 2005, 0.05% of all patients treated subsequently made a formal complaint. This equates to 1 complaint for every 1,834 patients treated.
- 98 (44%) complaints were answered within 20 working days.
- 28 (13%) complainants made secondary contact with the Trust for further clarification of concerns they made in 2004 to 2005.
- The Healthcare Commission took over responsibility for reviewing NHS complaints that are not resolved at a local level from the 30th July 2004. The Trust were notified of 21 (9.5%) requests for an Independent Review during the year.
- One complainant forwarded their concerns to the Parliamentary and Health Service Ombudsman who referred the complaint back to the Trust.

Main Themes Featuring in Formal Complaints 2004 to 2005



Note: Numbers represent number of times the theme appears. Percentages in brackets show percentage relating to total number of complaints received (221).

We take complaints very seriously and use them as a means of making improvements. Here is just a selection of issues where we have listened and responded.

Actions Arising From Formal Complaints

- Problems with early morning dispensing of hot drinks
Ward hostess employed
- Is there a possibility of providing music in the reception area for Breast Screening?
Music is provided, but can be switched off at the patient's request
- Special menus for patients
A range of frozen Halal menus are now available
- Patients have been having problems getting hot drinks on the wards at regular intervals
New beverage trolleys have been ordered for each ward
- Why is there no clock in the atrium?
A clock has now been installed in the atrium and one will also be installed in the reception area in the Brunel Treatment Centre.
- Why is there a lack of wheelchairs available for patients and visitors to use?
Wheelchairs have now been made available in a bay outside the main entrance. These are for the exclusive use of the public and are coin operated.
- Why can't we have any food in the discharge lounge?
Snack boxes will be trialled in the discharge lounge from the 13 December 2004.

However, it is gratifying to learn from our ongoing survey that patient's are largely impressed with the care we provide.

PALS acts as a key focus for consultation with local groups and it is important to acknowledge the contribution our Patient and Public Involvement Forum makes in our continuous efforts to improve healthcare.

How YOU cared

Fundraising in the Trust is managed through Charitable Funds Committee in line with NHS and Charities Commission guidance.

Major donors in 2004/2005 include:

- Women's Institute Upper Stratton**
£25,000, which was earmarked towards a Patient Information System for the ENT dept, recliner chairs, multi-purpose hoist, bath step and shower chair for Beech Ward and balance bladder scanners for Falcon and Aldbourne Wards.
- Mr D Stocks**
£10,000 in memory of his wife Mrs Peggy Stocks towards a new haematology rest room in the Dove Unit.
- Rotary Club of North Wiltshire & Leading Families**
The Rotary Club of North Wiltshire and leading families in the Swindon area donated a total of £6,275 towards eight coin-operated wheelchairs and a wheelchair structure located outside the entrance to the hospital.
- Richard Pope Memorial Shoot - £4,500.**
- Rotary Club Old Town Swindon- £4,500**
- Mr M Sillars- £4,000 in memory of his late wife Mrs Janice Sillars**
- Ladbroke's Ltd - £3,700**
- The Inchcape Foundation £2,500**

This is just a small selection of those who have supported us during the year. Our thanks to everyone who has donated to our Trust.

Developing Mental Health

Our Child and Adolescent Mental Health team have worked hard to bring down waiting times in line with national targets - these have reduced considerably and we have seen 997 new clients to the service and 6,367 follow-ups service this year.

The current waiting time is 17 weeks and we are striving to bring this down even further.

The adolescent inpatient unit is up and running smoothly with excellent facilities for the young people including £1,000 worth of outdoor equipment funded by the Dettol Foundation. We have 10 of our 12 beds open - but we aim to open all beds in the near future. Within the adolescent service we also have six day places.

Our Day Services are working on five projects for The Children's Fund. Three of them are based in schools working with education staff and children in group settings, and the other two are working alongside parents at home and with teachers promoting positive relationships with children with emotional and behavioural difficulties.

Scanning waits down

by Dr Alf Troughton, Clinical Director Radiology



The Radiology Department had a very successful year in reducing waiting times. They made excellent progress on the DEXA scanning waiting list which reduced from over six months to just two weeks as a result of the efficiencies gained by new ways of working and now have one of the lowest waiting times in the country. All the other areas such as CT, MR, US, NM and screening reached record low levels.

The department also introduced a 'traffic light' system to reduce the amount of time patients wait for general radiography within the department and it is now very rare for any patient to wait over half an hour for their scan.

Radiology was also at the very forefront of the national booking programme

A new CT scanner greatly speeded up the simpler investigations, but it has been a victim of its own success. A wider range of investigations can be performed on this CT scanner, and use of CT in pulmonary angiography, urography, cardiology and virtual colonoscopy will be growth areas.

Funding for GUM service

by Dr Guy Rooney, GUM consultant

Government funding of £180,000 per year meant our Sexual Health (Genito Urinary Medicine) team could expand to meet the growing need for services in the Swindon area.

This money has been vital to us because in the past six years we have seen a 70% increase in new patients and a 200% increase in Chlamydia infections, one of the highest rates in the South West. Correspondingly, waiting times had increased from less than one week to up to four weeks.

The money has allowed the service to expand nurse as well as doctor led clinics. Waiting times have dramatically reduced and the team is on course to meet the Government target of reducing waiting times to 48 hours. A newly appointed consultant will work with the PCT to expand community outreach youth clinics

The HIV caseload has seen a corresponding rise with the department treating over 80 patients. The GUM team also carry out routine testing of pregnant women for HIV.

The extra funding will help to expand youth clinics in Swindon which also offer contraception services and to establish a screening programme through primary care and contraception services in the area.



A year of awards

The past year has been seen the innovation and hard work of our staff rewarded with a number of prestigious awards – from being mentioned in the Queen's honours list through to taking the country's top prize for health and safety.

This is a reflection of the dedication, commitment and creativity of our team and the constant pursuit of

excellence and genuine desire to improve patient care and the environment in which we provide that care.

We are very proud of the achievements of those whose stories appear on this page. There are many others, not mentioned here, whose work, drive and enthusiasm is also a credit to them and to our organisation.

Sally scoops new award

Sally Caldwell, a blood transfusion practitioner was the winner of the Trust's first "Donaldson Clinical Governance Award", named after the Chief Medical Officer for the NHS Sir Liam Donaldson.



Sally Caldwell receives the first ever Donaldson Award from Aidan Halligan.

Aidan Halligan, Deputy Chief Medical Officer, Department of Health and Director of Clinical Governance for the NHS, presented the award when he visited the Trust in May. Sally was recognised for her drive, enthusiasm and leadership in developing a Trust-wide system of electronic patient identification. Her system reduces the chances of mislabelling specimens and patients being given the wrong name bands which is an important improvement in patient safety.

Staff "Oscars" pay tribute to outstanding achievement

The Trust's 6th annual Special Achievement Awards once again highlighted the extraordinary dedication and professionalism of teams and individuals within the organisation.

The awards were created to recognise people within the Trust who went beyond the call of duty to make a difference within the organisation. Dedication, innovation and determination were just three of the attributes which were reflected in this year's awards.

The winners were all nominated by colleagues and this year included four teams and eight individuals. The prizes were awarded by Chair, Patsy Newton, at a special ceremony in the Trust's Education Centre.

Among this year's winners were the team responsible for organising the Trust's open day (see page 3), Dr Moses Duku for his work in organising the three day Royal College of Physicians' clinical examinations at GWH, the electrical shutdown team who had to manage a number of complex power and utility shutdowns during the year, the Day Surgery Unit Team who maintained a high quality service despite periods of bed pressures and Linda Baxter for her work as the Staffside Chair of the Employee Partnership Forum and on the Agenda for Change project. (for the full list of winners visit our website www.swindon-marlborough.nhs.uk)

Trust takes top award for safety

Swindon and Marlborough NHS Trust is officially a five star organisation when it comes to safety. In the Health and Safety Management audit held by the British Safety Council in early 2005, the Trust received the prestigious top award of five stars with a rating of 97.8% - the first Private Finance Initiative hospital ever to do so.

The audit covered all aspects of the Trust's health and safety measures in a rigorous six day examination which included documentation and interviews with staff and management.

A team from the Trust travelled to London to receive the five star award in July.

The award is recognition of a huge amount of hard work by everyone in the Trust which includes not just Trust staff but the teams from the private sector partners, The Hospital Company and Carillion Services Ltd with whom we have worked very closely to make the hospital a safe place for patients, staff and visitors.

Something to crow about

The Communications Team won two national awards for their "Crows" campaign to promote the new Brunel NHS Treatment Centre. Working alongside the Treatment Centre Project Team, they commissioned a cartoonist to help them create two comic crow characters who were depicted flying over and around the new facility and explaining all about it (see page two).

The Crows starred in displays, posters and leaflets which were distributed in their thousands all over Swindon and the surrounding area. They also featured in the local media.

The campaign won the best service specific communication in the Communicating Health Awards in 2004 and also took the overall Award for Excellence.

Palace date for Ruth Lockwood OBE

Ruth Lockwood, our Director/Senior Nurse for Infection Control was awarded an OBE in the Queen's Honours List.



Ruth Lockwood (centre) with Helen Forrest (front) and Tina McCready.

As congratulations, flowers and cards flooded into her office, a delighted Ruth paid tribute to her colleagues Helen Forrest and Tina McCready who she described as a "fantastic team" who had given her outstanding support over the years.

She said: "I was very surprised to receive this award. It is a great honour and I am delighted to have received it."

Chief Executive Lyn Hill Tout said: "The Trust is absolutely delighted and very proud that Ruth Lockwood has been awarded this honour. Not only is it a tangible recognition of her personal and professional commitment, drive and enthusiasm in her field, of infection control, but is a positive reflection of the team and individuals who work closely with Ruth and support her in her work. Ruth's contribution at a local, national and international level has positively affected the improved care and safety of patients."

Ruth who was nominated by the Trust will pick up her award at a special ceremony at Buckingham Palace later in the year.

Financial Review and Summary Financial Statement

The financial information set out below is a summary of the full accounts for 2004/05. References to notes in the summary financial statements relate to the full set of accounts. Which are available on request from:
Director of Finance
Swindon and Marlborough NHS Trust, The Great Western Hospital, Marlborough Road, Swindon, Wiltshire SN3 6BB

Financial Performance

The Trust has three key financial duties:

- To breakeven on income and expenditure taking one year with another.
- Not to overspend its Capital Resource Limit.
- To achieve its External Financing Limit (a cash limit set by the Department of Health).

The table below sets out the performance of the Trust against these targets in 2004/05 and the previous seven years.

	Total Income £K	Surplus (deficit) in the year £K	Cumulative Surplus (Deficit) Since 1997/8 £K	External Financing Limit	Capital Resource Limit
1997/98	71,583	(3,564)	(3,564)	Target Achieved	N/A
1998/99	80,348	813	(2,751)	Target Achieved	N/A
1999/00	103,180	1,268	(1,483)	Target Achieved	N/A
2000/01	91,032	1,496	13	Target Achieved	N/A
2001/02	100,314	16	29	Target Achieved	Target Achieved
2002/03	121,695	13	42	Target Achieved	Target Achieved
2003/04	126,978	11	53	Target Achieved	Target Achieved
2004/05	138,249	4	57	Target Achieved	Target Achieved

Commentary on the Year

Avon, Gloucestershire and Wiltshire (AGW) Health Economy

The overall reported financial position for AGW at the end of 2004/05 was a deficit of £7.3 million. The accumulated deficits including that for previous years deferred by the Department of Health therefore amount to £97.3 million at 31st March 2005. (Note 03/04 and 04/05 have been or are due to be repaid).

In 2004/05 AGW received funding from the NHS Bank totalling £40m. This was allocated to PCT's and NHS Trusts in Avon, Gloucestershire and Wiltshire to support the financial position in 2004/05. Swindon and Marlborough Trust did not receive any such financial support.

The Trust

The Trust delivered a breakeven budget in 2004/05, a small surplus of £4,000, a considerable achievement considering there were significant in year pressures from the use of temporary nursing and medical staff, drugs and utilities.

Financial Position for 2005/06

The Trust is planning to achieve financial balance in 2005/06. The SHA has confirmed that non-recurrent support of £NIL will be made available from the NHS Bank special assistance funding.

In order to breakeven in 2005/06 the Trust must achieve the following:

- i) Deliver a savings programme of £6,658K.
- ii) Achieve £1.1m additional new income through spare capacity in the Treatment Centre/GWH.
- iii) Manage other known risks, which have yet to be quantified but include the impact of Agenda for Change, Payment by Results and Trust savings as yet unidentified.
- iii) The Trust has an underlying deficit of £5.7m, which is being covered by non-recurring support in 2005/06 via DOH PFI hospitals funding £2.6m and non-recurring Primary Care Trust Support of £3.1m. The Trust is in the process of developing a three-year financial recovery plan in line with Department of Health Guidance.

The recovery plan was approved by the Board in July and will be submitted to AGW in due course.

Balance Sheet Commentary for 2004/05

Although the External Financial Limit target was achieved the Trust did not improve its Public Sector Pay Policy performance as much as it would have liked and it will be targeting this performance as a priority in 2005/06.

Income & Expenditure Account for the Year Ended – 31 March 2005

	2004/05	2003/04
NOTE	£000	£000
Income from activities	3	111,424
Other operating income	4	15,554
Operating expenses	5-7	(126,228)
OPERATING SURPLUS (DEFICIT)	729	750
Cost of fundamental reorganisation/restructuring*	0	0
Profit (loss) on disposal of fixed assets	8	(61)
SURPLUS (DEFICIT) BEFORE INTEREST	729	689
Interest receivable	145	151
Interest payable	9	(7)
Other finance costs - unwinding of discount	(41)	(44)
Other finance costs - change in discount rate on provisions	0	0
SURPLUS (DEFICIT) FOR THE FINANCIAL YEAR	833	789
Public Dividend Capital dividends payable	(829)	(778)

RETAINED SURPLUS (DEFICIT) FOR THE YEAR

The notes on pages 1 to 36 form part of these accounts.
All income and expenditure is derived from continuing operations.
NOTE TO THE INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 March 2005

	£000
Retained surplus/(deficit) for the year	4
Financial support included in retained surplus/(deficit) for the year -	0
Financial support included in retained surplus/(deficit) for the year -	0
Retained surplus/(deficit) for the year excluding financial support	4

Balance Sheet as at 31 March 2005

NOTE	31 March 2005 £000	31 March 2004 £000
FIXED ASSETS		
Intangible assets	10	0
Tangible assets	11	25,949
Investments	14.1	0
	53,013	25,949
Debtors:Amount due after more than one year	10,912	11,612
CURRENT ASSETS		
Stocks and work in progress	12	1,577
Debtors	13	14,733
Investments	14.2	0
Cash at bank and in hand	18.3	22
	8,251	16,332
CREDITORS: Amounts falling due within one year	15	(10,132)
NET CURRENT ASSETS (LIABILITIES)		(1,881)
TOTAL ASSETS LESS CURRENT LIABILITIES		62,044
CREDITORS: Amounts falling due after more than one year	15	(1,449)
PROVISIONS FOR LIABILITIES AND CHARGES	16	(2,859)
TOTAL ASSETS EMPLOYED		57,736
FINANCED BY:		
TAXPAYERS' EQUITY		
Public dividend capital	22	20,637
Revaluation reserve	17	6,564
Donated asset reserve	17	2,010
Government grant reserve	17	0
Other reserves*	17	0
Income and expenditure reserve	17	8,148
TOTAL TAXPAYERS EQUITY		57,736

Signed:  (Chief Executive)

Date: 7th July 2005

Management and Administration Costs

Management and administration costs rose from 3.95% of income in 2003/04 to 4.00% of income in 2004/05, this is an increase of .05% and is due to the increase in employers superannuation costs.

Public Sector Payment Policy - Better payments practice code

In accordance with the CBI prompt payment code and Government accounting rules, the Trust's payment policy is to pay non NHS creditors within 30 days of receipt of goods or a valid invoice (whichever is later) unless other payment terms have been agreed.

Note 7.1 shows the Trust paid 82.43% by number and 84.87% by value within 30 days compared with 74.06% by number and 79.69% by value in 2003/04.

Other Financial Matters

No directors of the Trust hold company directorships where those companies are likely to do business with the NHS.

Statement of Total Recognised Gains and Losses for the year ended 31 March 2005

	2004/05 £000	2003/04 £000
Surplus (deficit) for the financial year before dividend payments	833	789
Fixed asset impairment losses	0	0
Unrealised surplus/(deficit) on fixed asset revaluations/indexation	20,507	5,411
Increases in the donated asset and government grant reserve due to receipt of donated and government grant financed assets	60	11
Reductions in the donated asset and government grant reserve due to the depreciation, impairment and disposal of donated and government grant financed assets	(257)	(274)
Additions/(reductions) in "other reserves"	0	0
Total recognised gains and losses for the financial year	21,143	5,937
Prior period adjustment	0	0
Total gains and losses recognised in the financial year	21,143	5,937

Cash Flow Statement For The Year Ended 31 March 2005

NOTE	2004/05 £000	2003/04 £000
OPERATING ACTIVITIES		
Net cash inflow/(outflow) from operating activities	18.1	(166)
RETURNS ON INVESTMENTS AND SERVICING OF FINANCE:		
Interest received	141	154



Interest paid	0	(7)
Interest element of finance leases	0	0
Net cash inflow/(outflow) from returns on investments and servicing of finance	141	147
CAPITAL EXPENDITURE		
(Payments) to acquire tangible fixed assets	787	(7,252)
Receipts from sale of tangible fixed assets	0	9,257
(Payments) to acquire intangible assets	0	0
Receipts from sale of intangible assets	0	0
(Payments to acquire)/receipts from sale of fixed asset investments	0	0
Net cash inflow/(outflow) from capital expenditure	787	2,005
DIVIDENDS PAID	(829)	(778)
Net cash inflow/(outflow) before management of liquid resources and financing	(67)	1,050
MANAGEMENT OF LIQUID RESOURCES		
(Purchase) of current asset investments	0	0
Sale of current asset investments	0	0
Net cash inflow/(outflow) from management of liquid resources	0	0
Net cash inflow/(outflow) before financing	(67)	1,050
FINANCING		
Public dividend capital received	7,500	0
Public dividend capital repaid (not previously accrued)	(7,433)	(1,050)
Public dividend capital repaid (accrued in prior period)	0	0
Loans received	0	0
Loans repaid	0	0
Other capital receipts	0	0
Capital element of finance lease rental payments	0	0
Cash transferred (to)/from other NHS bodies*	0	0
Net cash inflow/(outflow) from financing	67	(1,050)
Increase/(decrease) in cash	0	0

5.3 Salary and pension entitlements of senior managers

A) Remuneration

Name and Title	Salary (bands of £5000)	2004-05 Other Remu- neration (bands of £5000)	Benefits in Kind Rounded to the nearest £100	Salary (bands of £5000)	2003-04 Other Remu- neration (bands of £5000)	Benefits in Kind Rounded to the nearest £100
	£000	£000	£100	£000	£000	£100
P Newton (Chair from 01/02/04)	£15-20	-	-	£0-5	-	-
S Webber (Chair 01/06/06 to 31/01/04)	-	-	-	£10-15	-	-
N Godden (Chair 01/04/03 to 31/05/03)	-	-	-	£0-5	-	-
S Webber (Non Executive Director 01/04/06 to 31/05/03)	-	-	-	£0-5	-	-
Z Pauncefort (Non Executive Director 01/04/03 to 31/10/03)	-	-	-	£0-5	-	-
D Venables (Non Executive Director 01/04/03 to 31/10/03)	-	-	-	£0-5	-	-
K Small (Non Executive Director from 01/11/03)	£5-10	-	-	£0-5	-	-
J Adey (Non Executive Director to 31/05/03 then Vice Chair)	£5-10	-	-	£5-10	-	-
R Cobbold (Non Executive Director)	£5-10	-	-	£5-10	-	-
A Gillibrand (Non Executive Director from 01/07/04)	£0-5	-	-	-	-	-
L Bennett (Non Executive Director from 01/07/04)	£0-5	-	-	-	-	-
L Hill-Tout (Chief Executive)	£100-105	-	-	£95-100	-	-
P Bentley (Acting Chief Executive 03/11/03 to 05/01/04)	-	-	-	£15-20	-	-
P Bentley (Director of Human Resources)	£75-80	-	-	£40-45	-	-
S Tewkesbury (Acting Director of Human Resources 03/11/03 to 05/01/04)	-	-	-	£5-10	-	-
S McRitchie Pratt (Acting Director of Operations 01/04/03 to 29/08/03)	-	-	-	£20-25	-	-
S Rowley (Director of Operations from 25/08/03)	£65-70	-	-	£30-35	-	-
T Payne (Director of Estates and Facilities from 04/08/03)	£60-65	-	-	£40-45	-	-
E Strachan-Hall (Director of Nursing 01/04/03 to 21/09/03)	-	-	-	£25-30	-	-
F Thompson (Director of Nursing from 08/09/03)	£65-70	-	-	£35-40	-	-
S Webster (Director of Finance 01/04/03 to 15/06/03)	-	-	-	£10-15	-	-
S Haynes (Acting Director of Finance 09/06/03 to 09/11/03)	-	-	-	£ 25-30	-	-
M Moore (Acting Director of Finance 06/11/03 to 15/12/03)	-	-	-	£5-10	-	-
C Moar (Director of Finance from 15/12/03)	£80-85	-	-	£20-25	-	-
J Henson (Medical Director)	£150-155	-	-	£115-120	-	-
D Davies (Director of IM&T)	£60-65	-	-	£60-65	-	-

B) Pension Benefits

Name and title	Real increase pension and related lump sum at age 60	Total accrued pension and related lump sum at age 60 at 31 March 2005	Cash Equivalent Transfer Value at 31st March 2005	Cash Equivalent Transfer Value at 31st March 2004	Real Increase Cash Equivalent Transfer	Employers Contribution Stakeholder Pension
	(bands of £2500) £000	(bands of £5000) £000	£000	£000	£000	To nearest £100
L Hill -Tout Chief Executive	£10-12.5	£85-90	413	354	48	0
P Bentley Director of Human Resources	£5-7.5	£50-55	196	170	22	0
S Rowley Director of Operations	£15-17.5	£55-60	253	187	61	0
T Payne Director of Estates and Facilities	£17.5-20	£35-40	144	83	59	0
F Thompson Director of Nursing	£2.5-5	£30-35	146	122	21	0
C Moar Director of Finance	£25-27.5	£25-30	95	20	74	0
J Henson Medical Director						
D Davies Director of IM&T	£2.5-5	£30-35	147	129	15	0

As Non-Executive members do not receive pensionable remuneration, there will be no entries in respect of pensions for Non-Executive members.

A Cash Equivalent Transfer Value (CETV) is the actuarially assessed capital value of the pension scheme benefits accrued by a member at a particular point in time. The benefits valued are the member's accrued benefits and any contingent spouse's pension payable from the scheme. A CETV is a payment made by a pension scheme, or arrangement to secure pension benefits in another pension scheme or arrangement when the member leaves a scheme and chooses to transfer the benefits accrued in the former scheme. The pension figures shown relate to the benefits that the individual has accrued as a consequence of their total membership of the pension scheme, not just their service in a senior capacity to which the disclosure applies. The CETV figures, and from 2004/05 the other details, include the value of any pension benefits in another scheme or arrangement which the individual has transferred to the NHS pension scheme. They also include any additional pension benefit accrued to the member as a result of their purchasing additional years of pension in the scheme at their own cost. CETV's are calculated within the guidelines and framework prescribed by the Institute and Faculty of Actuaries.

Real Increase in CETV - This reflects the increase in CETV effectively funded by the employer. It takes account of the increase in accrued pension due to inflation, contributions paid by the employee (including the value of any benefits transferred from another pension scheme or arrangement) and uses common market valuation factors for the start and end of the period.

6.4 Management costs

	2004/05 £000	2003/04 £000
Management costs	5,376	4,489
Income	134,403	113,651
Percentage	4.00	3.95

6.5 Retirements due to ill-health

During 2004/05 (prior year 2003/04) there were 2 (3) early retirements from the Trust agreed on the grounds of ill-health.

The estimated additional pension liabilities of these ill-health retirements will be £77,000 (£147,000).

The cost of these ill-health retirements will be borne by the NHS Pensions Agency

7.1 Better Payment Practice Code - measure of compliance

	2004-05 Number £000	2003-04 Number £000
Total bills paid in the year	39,720 58,540	47,898 62,433
Total bills paid within target	32,740 49,685	35,474 49,753
Percentage of bills paid within target	82% 85%	74% 80%

The Better Payment Practice Code requires the Trust to aim to pay all valid non-NHS invoices by the due date or within 30 days of receipt of goods or a valid invoice, whichever is later.

7.2 The Late Payment of Commercial Debts (Interest) Act 1998

	2004/05 £000	2003/04 £000
Amounts included within Interest Payable (Note 9) arising from claims made under this legislation	0	7
Compensation paid to cover debt recovery costs under this legislation	0	0

Statement of the Chief Executive's responsibilities as the accountable officer of the Trust

The Secretary of State has directed that the Chief Executive should be the Accountable Officer to the Trust. The relevant responsibilities of Accountable Officers, including their responsibility for the propriety and regularity of the public finances for which they are answerable, and for the keeping of proper records, are set out in the Accountable Officers' Memorandum issued by the Department of Health.

To the best of my knowledge and belief, I have properly discharged the responsibilities set out in my letter of appointment as an accountable officer.

7th July 2005 Date..... *Wm Rufflaw*..... Chief Executive

Statement of Directors' Responsibilities in Respect of the Accounts

The directors are required under the National Health Services Act 1977 to prepare accounts for each financial year. The Secretary of State, with the approval of the Treasury, directs that these accounts give a true and fair view of the state of affairs of the trust and of the income and expenditure of the trust for that period. In preparing those accounts, the directors are required to:

- Apply on a consistent basis accounting policies laid down by the Secretary of State with the approval of the Treasury.
- Make judgements and estimates which are reasonable and prudent.
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the accounts.

The directors are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the trust and to enable them to ensure that the accounts comply with requirement outlined in the above mentioned direction of the Secretary of State. They are also responsible for safeguarding the assets of the trust and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The directors confirm to the best of their knowledge and belief they have complied with the above requirements in preparing the accounts.

By order of the Board

7th July 2005 Date..... *Wm Rufflaw*..... Chief Executive

7th July 2005 Date..... *Chell Hesse*..... Finance Director

Statement of Directors' Responsibilities in Respect of Internal Control

The Board is accountable for internal control. As Accountable Officer, and Chief Executive Officer of this Board, I have responsibility for maintaining a sound system of internal control that supports the achievement of the organisation's objectives, and for reviewing its effectiveness. I also have responsibility for safeguarding the public funds and the organisation's assets for which I am personally responsible as set out in the Accountable Officer Memorandum.

The system of internal control is designed to manage risk to a reasonable level rather than to eliminate all risk of failure to achieve these policies, aims and objectives; it can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to:

- Identify and prioritise the risks to the achievement of the organisation's policies, aims and objectives,
- Evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

The system of internal control has been in place in Swindon and Marlborough NHS Trust for the year ended 31st March 2004 and up to date of approval of the annual report and accounts is based on an ongoing risk management process designed to identify the principal risks to the achievement of the organisation's objectives; to evaluate the nature and extent of those risks; and to manage them efficiently, effectively and economically. The system of internal control is underpinned by compliance with the requirements of the core Controls Assurance standards:

- Governance
- Financial Management
- Risk Management

As Accountable Officer, I also have responsibility for reviewing the effectiveness of the system of internal control. My review of the effectiveness of the system of internal control has taken account of the work of the executive management team within the organisation who have responsibility for the development and maintenance of the internal control framework, and of the internal auditors. I have also taken account of comments made by external auditors and other review bodies in their reports.

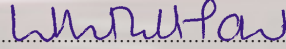
The assurance framework is still being finalised and will be fully embedded during 2003/04 to provide the necessary evidence of an effective system of internal control.

The actions taken so far include:

- The Trust has undertaken a self-assessment exercise against the core Controls Assurance standards (Governance, Financial Management and Risk Management). An action plan has been developed which will be implemented to meet any gaps.
- The Trust has in place arrangements to monitor, as part of its risk identification and management processes, compliance with other key standards, including relevant Controls Assurance standards covering areas of potentially significant organisation risk.

In addition to the actions outlined above, in the coming year it is planned to:

- Complete the development of a comprehensive trust wide risk register - Quarter 3 - 2003/04
- Complete the development of risk and performance indicators - Quarter 4 - 2003/04
- The implementation and monitoring of actions in response to the assessments made by CNST, RPST and CHI - Quarter 2/3 - 2003/04

Signed..........Chief Executive Officer
Date.....7th July 2005.....(on behalf of the board)

The Trust Auditors

The Trust's auditors are: Audit Commission, Westward House, Lime Kiln Close, Stoke Gifford, Bristol BS4 8SR
The Auditors were paid £181.9k in 2004/05 for audit services of a statutory nature, eg: reports to the Department of Health including the audit of the annual accounts.

Independent Auditors' Report to Swindon and Marlborough NHS Trust on the Summary Financial Statements

I have examined the summary financial statements set out above.
This report is made solely to the Board of Swindon and Marlborough NHS Trust in accordance with Part II of the Audit Commission Act 1998 and for no other purpose, as set out in paragraph 54 of the Statement of Responsibilities of Auditors and of Audited Bodies, prepared by the Audit Commission.

Respective responsibilities of directors and auditors

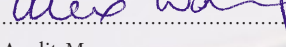
The directors are responsible for preparing the Annual Report. My responsibility is to report to you my opinion on the consistency of the summary financial statements with the statutory financial statements. I also read the other information contained in the Annual Report and consider the implications for my report if I become aware of any misstatements or material inconsistencies with the summary financial statements.

Basis of opinion

I conducted my work in accordance with Bulletin 1999/6 'The auditor's statement on the summary financial statements' issued by the Auditing Practices Board for use in the United Kingdom.

Opinion

In my opinion the summary financial statements are consistent with the statutory financial statements of the Trust for the year ended 31 March 2004 on which I have issued an unqualified opinion.

Signature..........Date.....15 July 2005.....
Name: Alex Walling, Audit Manager
Address: Audit Commission, Westward House, Lime Kiln Close, Stoke Gifford, Bradley Stoke, Bristol, BS34 8SR

Membership of the Audit and Controls Assurance Committee

The Audit and Controls Assurance Committee exists to support the Trust Board in its duty to ensure that the Trust has the systems to effectively manage its affairs. The members of the Committee during 2004/05 were:

Chair John Adey
Non Executive Director Rowland Cobbold
Non Executive Director Angela Gillibrand (appointed 01.07.04)

Membership of the Remuneration and Terms of Service Committee

The committee exists to determine the pay and remuneration of the Chief Executive, Executive Directors and other senior managers of the Trust. The membership of the committee during 2004/05 was:

Trust Chairman Patsy Newton
Non Executive Director John Adey
Non Executive Director Rowland Cobbold
Non Executive Director Kevin Small
Non Executive Director Lesley Bennett (appointed 01.07.04)
Non Executive Director Angela Gillibrand (appointed 01.07.04)

Charitable Funds

The Swindon and Marlborough NHS Trust Charitable Fund received income of £388,000 in 2004/05 compared with £312,000 in 2003/04. These figures are subject to Audit.

	2004/05	2003/04
Donations	212,000	224,000
Legacies	98,000	18,000
Investment Income	52,000	50,000
Grants from other NHS charities *	0.00	9,000
Activities to further charitable objectives	26,000	11,000
	388,000	312,000

Expenditure is as follows:

	2004/05	2003/04
Cost of generating funds	9,000	3,000
Grants made to other NHS bodies *	21,000	
Grants made to the Trusts **	254,000	246,000
Management & admin costs	40,000	33,000
	324,000	282,000
(Gains) Losses on investments	(37,000)	(44,000)
	287,000	238,000
Increase (decrease) in funds	101,000	74,000
Total Funds held	1,061,000	960,000

* Transfer of learning disability services to Oxford
** Grants were made as follows:


	2004/05	2003/04
To Swindon & Marlborough NHS Trust	232,000	151,000
Swindon Primary Care Trust	10,000	13,000
Kennet & North Wiltshire Primary Care Trust	9,000	42,000
West Wiltshire Primary Care Trust	3,000	40,000
	254,000	246,000

Copies of the full accounts are available from:

Tony Carroll, Financial Controller, Commonhead Offices, The Great Western Hospital, Swindon, Wilts SN3 6BB

The Trust has a robust major incident plan in place. Our plan conforms to Department of Health guidance "Handling Major Incidents: An Operational Doctrine". The Trust experienced an actual major incident during the year when it prepared to treat patients from the Berkshire rail crash. Although no seriously injured patients were brought in, a debriefing took place and action plans to update and improve the plan carried out. With support from our local healthcare partners the Trust is prepared to respond to a major incident that delivers optimal care and assistance to victims, that minimises the consequential disruption to healthcare services and that brings about a speedy return to normal levels of functioning.

Through planning, testing, then fine-tuning our Major Incident Plan the Trust is prepared for a major incident.

Signed..........Chief Executive





ROUND UP

The fight against infections

Major strides were made in The Great Western Hospital's war against infection during the year. The Infection Prevention and Control Team reported a range of achievements assessed against national targets and local objectives which included:

- A demonstrable improvement in hand hygiene practices
- A low number of hip replacement patients suffering from wound infection after their operation
- A major review of MRSA management and a reduction in the prevalence of the bug
- The management and containment of 28 clusters of diarrhoea and/or vomiting with no evidence of it spreading elsewhere in the hospital.

However, they acknowledged they had areas for improvement which include the targets not being met for reducing reported MRSA Bacteraemias (where the infection gets into the bloodstream) and Clostridium difficile.

The Trust's MRSA bacteraemia rate featured in The Health Protection Agency's national league table which placed Swindon and Marlborough 86th out of 182 Trusts in the country. The table was measured on the number of bacteraemia reports and the MRSA rate (per 1000 bed days).

Ruth Lockwood, the Trust's Director of Infection Control said: "At first glance, our mid table position looks disappointing but our actual figures are low. We had just 23 patients with bacteraemias in the past year, six more than the previous year. We also know that nine of those patients already had the infection when they came into hospital which leaves just 14 with hospital acquired infection. That is 14 more than we would like but it is important to put the scale of the problem into perspective. Our rate was 0.146 which is the number of patients who developed a bacteraemia out of every 1000 patients who spent a day in a hospital bed. However, we are far from complacent and recognise we still have room for improvement

and we have developed a three year plan as part of our battle against hospital infections. Our infection prevention and control strategy, blends national directives with local needs, to help us fight MRSA and other bugs which affect patients in hospital."

The strategy follows a range of steps already taken in the Trust which include:

- Extra screening for all patients admitted to and discharged from high risk areas such as the Special Care Baby Unit, Intensive Care and the orthopaedic ward.
- Special procedures for managing patients colonised/infected with MRSA
- Extra funding for investigating all internally reported MRSA Bacteraemias
- Annual hand hygiene audits
- Monitoring of the hospital environment by the Trust's infection control team and modern matrons
- Updated antibiotic prescribing guidelines and the review of guidelines for the treatment of MRSA.

"No Zone" for smokers

The Trust launched a five metre smoking "No Zone." all around the Great Western Hospital in January.

Anyone wishing to smoke outside the hospital is now asked to do so at least five metres away from the building to ensure that staff, patients and visitors do not have to breathe second hand smoke.

As a health promoting organisation the Trust wants to discourage smoking as it is a proven cause of ill health. The policy also aims to reduce the amount of smokers' waste and litter around the building and supports the Government's Choosing Health initiative which aims to reduce the number of people who smoke.

Improved parking

Parking at The Great Western Hospital has been a controversial issue from the outset but the opening of 300 extra spaces for the new

Treatment Centre in April has eased the car park congestion and complaints have vastly reduced.

Better by bus

In a bid to encourage as many people as possible to get to The Great Western Hospital by public transport, the Trust has continued to work closely with local bus companies to ensure that local people are getting the service they need and want. At peak times there are now 18 buses per hour arriving at the hospital and they now drop passengers off both at the new Treatment centre and the SwICC building. There are now more buses more regularly from more destinations than ever before.

Sign of the times

Having learned lessons from signing issues in the early days of The Great Western, the Trust has worked closely with the Patients' Forum and after an 11 week consultation, the signs in the Brunel NHS Treatment Centre have been produced to better meet patient needs in terms of print size, visibility and location.

Working with our partners

Throughout the year we continued to work with our partners in local authorities, PCTs and the voluntary sector to improve healthcare. We made good progress with Swindon Borough Council and Wiltshire County Council in discharging patients more quickly and thanks go to both social services departments for their help in this. The re-imbursement grant we are given was used in co-operation with social services and PCTs to fund the initiatives which enabled us to discharge patients more quickly when appropriate. We also worked jointly with our partners on child protection issues.

New look Savernake

Savernake Hospital in Marlborough re-opened this year after a multi million pound redevelopment. The Trust provides the outpatient and radiography and medical records services in what is now a superb patient environment.

MORE CONSULTANTS AND BETTER TRAINING

By John Henson Medical Director

During the year, as part of a national initiative, we modernised the way we train and assess our doctors. Junior doctors will now go into a foundation programme for two years before moving into their chosen specialty. The aim is not only to train our doctors better but to get them into their specialist area more quickly and this is a significant stride forward.

We also created seven new consultant posts during the year which has allowed us to provide more consultant delivered care to our patients in Obstetrics and Gynaecology, Ophthalmology, Paediatrics, Radiology, Trauma and Orthopaedics and ENT.



More information?

If you would like more information about our Trust you can visit our web site www.swindon-marlborough.nhs.uk or contact Chris Birdsall, Communications Manager on 01793 604431 or 604418.