People and Culture summary

Indicator	Year end	Comparison to 2022/23
Appraisal completion	79%	81%
Sickness absence	5.84%	5.83%
Mandatory training compliance	91%	89%
Turnover rate	11.29%	12.14%

Key Highlights: Our Quality Journey 2023/24

Sarah Shingler
Chief Nursing Officer

Quality Journey

Roadmap to Improving Quality 2023-2025

The Trust published its annual Quality Account in June 2024.
Our quality journey is supported by the Roadmap to Improving Quality, which summarises the workstreams launched by the Nursing, Midwifery and Allied Health Professional Board that commenced in August 2023. Developments to date include:

Launch of the Fundamentals of Care Committee

- Monthly Committee with dedicated leads for the Fundamentals of Care

Care Excellence Accreditation Programme

- Aligned to the Foundation Group Programme,
  22 Inpatient Wards have been accredited since launch

Patient Inpatient Survey

- The launch of an Inpatient Survey, allowing for real-time feedback and improvements for patients in our care

NHS Wye Valley NHS Trust
NHS Worcestershire Acute Hospitals NHS Trust
NHS George Eliot Hospital NHS Trust
NHS South Warwickshire University NHS Foundation Trust

Care Quality Commission (CQC)

A summary of inspection activity 2023/24

October 2023

Maternity Core Service Inspection at Worcestershire Royal Hospital.
The inspection report was published November 2023, noting improvements, particularly in the Well-Led domain. The service rating was uplifted from 'Requires Improvement' to 'Good'.

	Safe	Effective	Caring	Responsive	Well-Led	Overall
Maternity	Requires Improvement Nov 2023 ↔	Good Feb 2021	Good Jun 2018	Good Jun 2018	Good Nov 2023 ↑	Good

February 2024

Radiation (Medical Exposure) Regulations 2017 Inspection at Worcestershire Royal Hospital.
IR(ME)R reports are not published, examples of both good practice and areas requiring improvement were recognised.

2023/24

Inspected and rated
Good
CareQuality Commission

December 2023

Critical Care Core Service Inspection at Worcestershire Royal Hospital.
The inspection report was published May 2024. The service rating was uplifted from 'Requires Improvement' to 'Good'.

	Safe	Effective	Caring	Responsive	Well-Led	Overall
Critical Care	Good May 2024 ↑	Good May 2024 ↔	Good May 2024 ↔	Good May 2024 ↑	Good May 2024 ↑	Good

Monitoring Inspection outcomes
Regulated Activity Improvement Tools (RAIT) produced to support the Divisions to provide evidence and assurance of improvements following regulatory inspection.

Quality Account 2023/24

Quality and Safety Summary

Care that is Safe

1. Reducing C.Diff healthcare acquired infections

- Did not achieve target of C.Diff cases.
- Achieved target around Antimicrobial Stewardship.
- Achieved IPC Mandatory Training goals.

2. Safe and timely discharge from hospital

- Maintained performance at 65% patients seen within 4 hours in ED.
- Improved position compared to last year in 1-hour ambulance handover delays.
- 20.7% increase since last year in patients attending Same Day Emergency Care (SDEC) areas.
- Increase in patients discharged before midday.

Care that is Clinically Effective

1. Continuously learn from deaths

- Summary Hospital-level Mortality Indicator (SHMI) of 1.06 “as expected”.
- Integration of internal committees to support learning from deaths.

2. Deliver action plans and identify improvements to achieve best practice

- Completion of four NICE audits.
- Compliance with 9 out of 10 safety actions under Maternity Incentive Scheme.
- Rapid process improvement workshops in Occupational Health referral and Consultant recruitment.

3. Annual programme of audits

- 100% compliance with eligible audits: 54 national audits & 3 confidential enquiries.
- 3 local audits with improvements identified.

4. Reduced waiting times for treatment

- Continued reduction in waiting times for patients.
- No patients waiting over 104 weeks.
- Over 75% patients referred with suspected cancer waited <28 days for diagnosis.
- 192 robotic surgery procedures.

Care that is a Positive Experience

1. Safe, personalised care and equality of outcomes for patients with Learning Disabilities

- Reintroduction of Learning Disability Steering Group to support shared learning.
- Continued work with ICB to support staff to access Oliver McGowan training.
- Introduction of standard practice to offer visits to departments for patients prior to procedures.

2. Patients feel listened to and have clear lines of communication with staff

- Resources to ensure accessible communication for patients who are d/Deaf.
- Availability of interpreting on demand machines.
- Launch of new, accessible Trust website.
- Partnership with AccessAble: 157 guides available.

3. Learning from patient feedback

- 42% increase in compliments since 2022/23.
- FFT recommendation target exceeded for Inpatient, Daycase, Outpatient and Maternity.
- Launch of inpatient survey.
- Recording and monitoring compliments.
- Themes and trends from Complaints.
- Sharing learning from complaints through Divisional and Trust steering groups.

Priorities moving forwards

Our Quality Priorities 2024/25

This year's Quality Priorities include:

- Infection prevention and control priority includes all healthcare acquired infections, rather than a focus on C.Difficile only.
- Focus on Hospital Acquired Functional Decline (HAFD).
- Reintroducing a focus on the management of sepsis, in emergency departments and inpatient wards.
- Nutrition and Hydration needs of patients.
- Combined quality priorities around clinical audits and national recommendations into one priority.
- Recognising harm as a result of waiting times.

Next steps for 2024/25

Our Quality and Patient Safety Plan from 2025.

- Engagement from our patients, their relatives and carers through the annual Big Quality Conversation to further learn from experiences of care.
- Engagement with staff, volunteers and partners.

Annual Accounts 2023/24

Neil Cook
Chief Finance Officer

Financial performance 2023/24

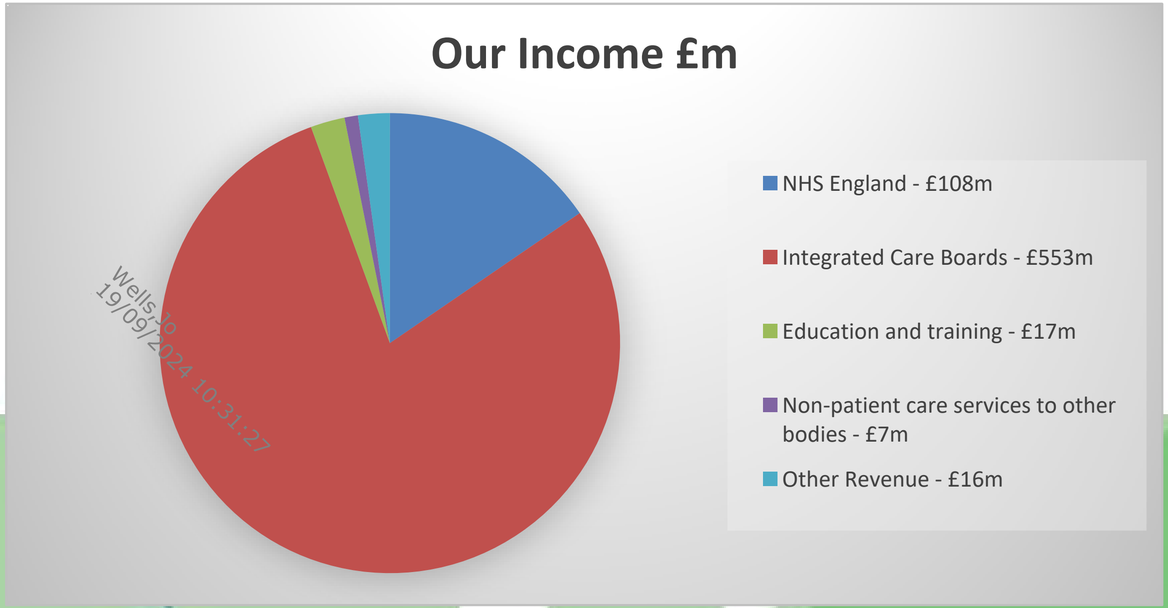
The 2023/24 financial year continued to present challenges working within a fixed price contract for our urgent and emergency care services against a backdrop of increased demand for urgent and emergency care services. The Trusts agreed a very challenging breakeven plan for the year with the ICS and NHSE as part of a national drive to improve the productivity and efficiency of the NHS as a whole. The Trust ended the year with a deficit of £34.8m (adjusted for the impact of impairments and donated assets).

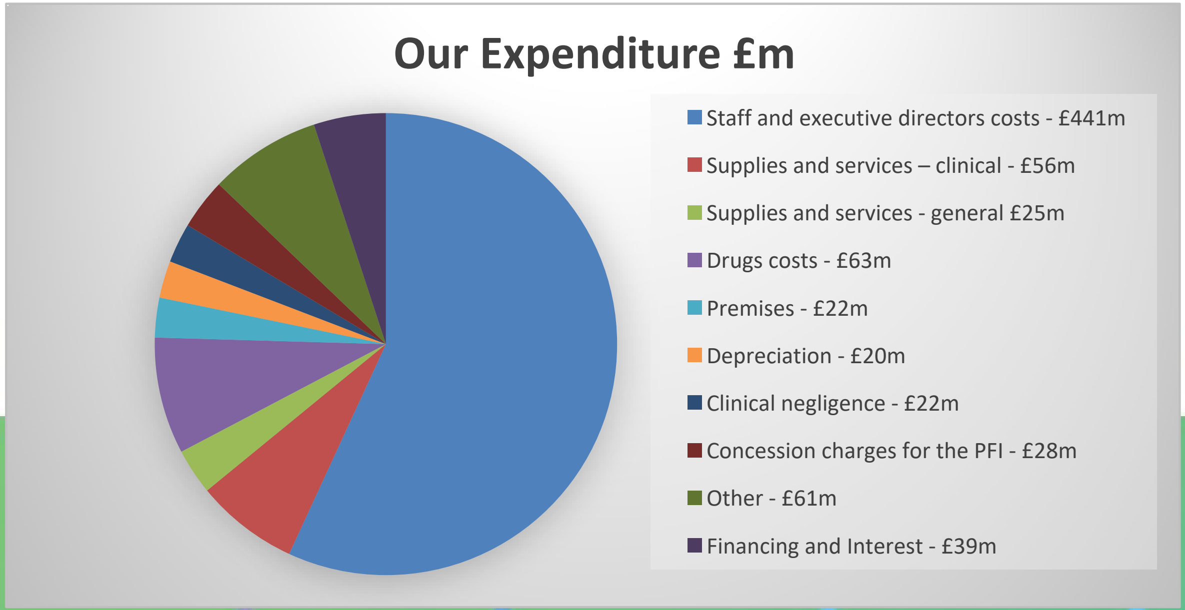
Criteria	Achieved
Achievement of Income & Expenditure (I&E) Plan	No
Break even on I&E taking one year with another	NO
Remain within the Capital Resource Limit	Yes
Remain within the External Financing Limit	Yes

Capital Investment in the year was £48.7m of which £17.2m was externally funded and included new Theatres at the Alexandra site, a Community Diagnostics hub at Kidderminster and investment in frontline digital infrastructure.

We generated of £27m of our own funding to support our internal building maintenance and equipment replacement programme

Cost and Productivity Improvement Programme: we delivered savings of £11.2m against a very challenging £28m (4.2 per cent) target. A number of schemes proved challenging to deliver, against a backdrop of increased demand for urgent and emergency care services, including a reduction in excess capacity, temporary staffing (agency) costs and system wide stretch savings. We have captured the learning delivery of our plans for 24/25.





External auditors opinion on the 2023/24 Financial Statements

The Accounts give a **True and Fair View** of the Trusts Financial Position and the Income and Expenditure for the year and have been **properly prepared** in accordance with international accounting standards as interpreted and adapted by the Department of Health and Social Care (DHSC) Group Accounting Manual 2023/24.

Value for Money Arrangements

In undertaking this work we have identified 4 significant weaknesses in the Trust's arrangement

Building on the work undertaken in 2023/24, the Trust should build on the medium-term planning to **develop a robust and realistic Medium Term Financial Strategy, which achieves financial balance in the next 3 to 5 years. The MTFS should be aligned to system level financial planning** and updated to reflect the changes made in the 2024/25 financial plan submitted to NHSE. For the MTFS to be robust, the Trust must agree the target position for the MTFS with system partners. Once the Trust reaches a robust understanding of the scale of financial pressures, an achievable strategy must be developed to address the Trust's underlying deficit.

The Trust should **prioritise the identification and delivery of CPIP plans** to support the delivery of the 2024/25 financial plan and Medium Term Financial Strategy.

The Trust needs to **accelerate the key work it is undertaking to understand the drivers of its high costs and dependency on bank and agency nursing**. This should then drive a work full strategy developed in conjunction with system partners.

The Trust needs to **ensure that robust arrangements are in place to monitor the PFI contract variations** from its operator, to ensure additional cost reagents are tightly controlled and that the life cycle funds currently accumulated are best utilised with the remaining duration of the contract.

Action plans have been agreed to address these actions ahead of the 2024/25 vfm review

Look forward

The year ahead remains extremely challenging given the national economic climate and the drive for restoration of services to pre pandemic levels and beyond to address the continued backlog of elective activity and increasing demand for urgent and emergency care services.

The funding made available for 2024/25 as part of our jointly agreed plans across the Herefordshire & Worcestershire Integrated Care System and signed off with NHS England mean that the Trust will need to target savings of £45.1m (6.6%). To put this into context this is more than 4 times what we delivered in 2023/24. However, we do know that there is significant opportunity for improvement in our financial performance. The Trust has a high underlying cost base compared to peer multi-site hospital Trusts driven in particular by higher temporary staffing costs and a non-standard PFI contract as one of the early implementer sites in the NHS.

Our Productivity and Efficiency Programme (CPIP) include focussed work in the following areas:

- Reduction in temporary staffing costs through improved recruitment strategy
- Improved productivity & efficiency in Out-Patients, Theatres and Hospital Flow
- Improved efficiency across the estate and back office services
- Better value from procurement of products and services

We have developed a draft internal financial strategy which we are discussing with partners as part of our wider H&W ICS Financial Strategy to address the underlying deficit and get us back to a sustainable financial system over the next few years. As part of this we are developing ways to collaborate and work together across the ICS and Group to improve productivity and efficiency and benefit value to patients.

Our capital programme for the year ahead includes replacement MR scanner and Cath Lab at the Worcestershire Royal site, HV Substation works at the Alexandra site and Reinforced Autoclaved Aerated Concrete (RAAC) replacement programme at the Kidderminster site.

Celebrating our achievements

Stephen Collman, Managing Director

Forward Look

Glen Burley

Forward look

- Elective recovery
- Trust vision and values development
- Clinical Services Strategy refresh
- Continued focus on urgent and emergency care (UEC) pathway
- Partnership Working
- Digital innovation – continued rollout of Electronic Patient Record

Questions?

Wells,Jo
19/09/2024 10:31:27

NHS
Wye Valley
NHS Trust

NHS
Worcestershire
Acute Hospitals
NHS Trust

NHS
George Eliot Hospital
NHS Trust

NHS
South Warwickshire
University
NHS Foundation Trust