## Contents

1. Chairman’s Foreword .................................................. 5

2. Trust Background and Overview .................................... 6

3. Directors’ Report ..................................................... 11

4. Management Commentary ........................................... 15

5. Capital Development Programme .................................. 18

6. Acute Services Directorate .......................................... 20

7. Medical Directorate .................................................. 28

8. Adult Mental Health and Learning Disability .................... 31

9. Primary Care, Older People’s Services and Nursing Directorate 37

10. Womens and Children’s Directorate .............................. 41

11. Finance, ICT and Contracting Directorate ....................... 47

12. Human Resources Directorate ...................................... 48

Finance Report ............................................................. 51
With any new birth there is the inevitable worry and anxiety – will things go well? The anxieties multiply when the birth is a new organisation with 12,500 staff, with new structures and operating within an emerging political context.

Given these enormous challenges it may have been expected and even accepted if we, as a new organisation, had taken a step backwards before moving forwards.

As Chairman, I am delighted to report that this has not happened. Real improvements have been achieved in 2007/08 across the wide spectrum of services delivered by the Western Trust. We have made significant improvements in the care of the patients and clients that we serve and in meeting central government targets. Our performance this year has been nothing short of remarkable given the challenges that we have faced.

Positive change is delivered through people and not by structures alone and this has proved to be the case in the Western Trust’s first year. I want to acknowledge the ongoing commitment and dedication of our 12,500 staff who continue to show they have the capabilities, skills and knowledge to make a difference. Through the individual and collective efforts of every member of staff we have made tremendous progress in meeting the health and social care needs of the 290,000 people who live in the Western area. Thank you for all your hard work this year.

Strong leadership is key to any organisation undergoing change and I want to pay tribute to the entire Trust Board team of executive and non executive directors who have worked so hard to set the organisation on the right path with sound governance and prudent financial stewardship. We ended the year with a small £56,000 surplus on a budget of £439m. This is an outstanding accomplishment and a credit to the financial management of the Financial Directorate, to the leadership which exists at all levels throughout the organisation and to the service directorates for delivering the necessary savings.

We have taken a very good step forward in our first year, meeting demanding targets, balancing our finances in year and working in partnership to implement the merger. We will now move forward, take that next step and focus on delivering even better care through well trained staff with high morale.

Gerard Guckian Chairman
The Western Health and Social Care Trust

The establishment of the Western Health and Social Care Trust (Western Trust) on 1 April 2007 brought together the delivery of health and social care which previously had been provided by three separate Trusts, namely Altnagelvin, Foyle and Sperrin Lakeland Trusts. Covering five Council areas and almost 5,000 kilometres of landmass, services are provided to a catchment population of 290,000 people. The Western Trust employs almost 12,500 staff and invests approximately £439 million in the delivery of a comprehensive range of health and social care services.

The vast majority of services are provided in community based settings with access to specialist inpatient services available from a number of hospitals such as Altnagelvin, Tyrone County, Erne, Waterside, Lakeview, Tyrone and Fermanagh and Gransha.

Our Vision

The aim of the Western Health and Social Care Trust is: “To provide high quality patient and client-focused health and social care services through well trained staff with high morale.”

This is supported by six core values. They are:

- High quality and safety
- Enabling our staff
- Integrity
- Equality
- Partnerships
- Employing our resources efficiently and effectively.

Our Services

The Western Trust provides a range of health and social care services across the Western area. Services are delivered across the following directorates:

- Acute Services
- Women and Children’s Services
- Primary Care and Older People’s Services
- Adult Mental and Learning Disability
- Medical.
These are supported by the Directorates of:

- Finance, ICT and Contracting
- Human Resources
- Planning and Performance Management.

The vast majority of these services are commissioned by the Western Health and Social Services Board. The Trust also commissions a significant range of services from the private, community and voluntary sectors.

Our Facilities

A significant proportion of the services are delivered in community based settings with specialist assessment and treatment input provided from a number of hospitals. In all, the capital value of the assets in use across the Western Health and Social Care Trust amounts to £344 million.

The Western Trust has:

- 3 hospitals, (Altnagelvin, Tyrone County Hospital and the Erne)
- 19 health centres and clinics
- 9 children’s homes
- 27 day centres
- 8 residential homes
- 3 psychiatric hospitals
- 1 geriatric hospital
- 6 ambulance bases
- 6 adult training centres
- 12 administration offices

And delivers services direct into 1000s of people’s homes.
Our Geography

The Western Trust provides health and social care services across 17% of the NI geographic landmass.

<table>
<thead>
<tr>
<th>Location</th>
<th>Population</th>
<th>Area Sq. Km</th>
<th>Density/Sq Km</th>
</tr>
</thead>
<tbody>
<tr>
<td>Derry/ Londonderry</td>
<td>107,904</td>
<td>387.4</td>
<td>279</td>
</tr>
<tr>
<td>Strabane D.C.</td>
<td>39,132</td>
<td>861.6</td>
<td>45</td>
</tr>
<tr>
<td>Omagh D.C.</td>
<td>51,030</td>
<td>1129.9</td>
<td>45</td>
</tr>
<tr>
<td>Enniskillen</td>
<td>60,570</td>
<td>1876.8</td>
<td>32</td>
</tr>
<tr>
<td>Limavady D.C.</td>
<td>34,346</td>
<td>586.3</td>
<td>59</td>
</tr>
<tr>
<td>Fermanagh D.C.</td>
<td>60,570</td>
<td>1876.8</td>
<td>32</td>
</tr>
</tbody>
</table>

Population: 292,982
Area Sq.Km: 4,842
Density/Sq Km: 61
Our Staffing

Western Trust by Professional Group

- Admin and Clerical: 946
- Works and Maintenance: 572
- Ancillary and General: 1865
- Nursing and Midwifery: 181
- Social Services: 1134
- Professional and Technical: 5493
- Medical and Dental: 3216

Our Trust Board Structures and Governance Arrangements

The Western Trust came into existence on 1 April 2007 and is a merger of the former Altnagelvin, Foyle and Sperrin Lakeland Trusts and Westcare Business Services.

The Trust Board is chaired by a Non-Executive Chairman supported by seven non-executive directors, the Chief Executive and eight executive directors. It has the following responsibilities:

- Sets the strategic direction of the organisation
- Reviews performance and quality outcomes
- Determines effective stewardship of the organisation’s resources
- Ensures that the highest standards of governance and personal conduct are maintained.
Trust Board Membership:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position on the Board</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gerard Guckian</td>
<td>Chairman</td>
</tr>
<tr>
<td>Niall Birthistle</td>
<td>Non-Executive Director and Chair of the Audit Committee</td>
</tr>
<tr>
<td>Sally O’Kane</td>
<td>Non-Executive Director and Chair of the Clinical and Social Care Governance Committee</td>
</tr>
<tr>
<td>Stella Cummings</td>
<td>Non-Executive Director</td>
</tr>
<tr>
<td>Joan Doherty</td>
<td>Non-Executive Director</td>
</tr>
<tr>
<td>Brendan McCarthy</td>
<td>Non-Executive Director</td>
</tr>
<tr>
<td>Ciaran Mulgrew</td>
<td>Non-Executive Director</td>
</tr>
<tr>
<td>Barbara Stuart</td>
<td>Non-Executive Director</td>
</tr>
<tr>
<td>Elaine Way</td>
<td>Chief Executive</td>
</tr>
<tr>
<td>John Doherty</td>
<td>Director of Women and Children’s Services and Executive Director of Social Work</td>
</tr>
<tr>
<td>Alan Finn</td>
<td>Director of Primary Care and Older People’s Services and Executive Director of Nursing</td>
</tr>
<tr>
<td>Dr Anne Kilgallen</td>
<td>Medical Director</td>
</tr>
<tr>
<td>Lesley Mitchell</td>
<td>Director of Finance, ICT and Contracting</td>
</tr>
<tr>
<td>Trevor Millar</td>
<td>Director of Adult Mental Health and Learning Disability</td>
</tr>
<tr>
<td>Oliver Kelly</td>
<td>Head of Communications</td>
</tr>
</tbody>
</table>

Also attending the Trust Board are:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position on the Board</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joe Lusby</td>
<td>Deputy Chief Executive and Director of Planning and Performance Management</td>
</tr>
<tr>
<td>Margaret Kelly</td>
<td>Director of Acute Services</td>
</tr>
<tr>
<td>Nuala Sheerin</td>
<td>Director of Human Resources</td>
</tr>
<tr>
<td>Trevor Millar</td>
<td>Director of Adult Mental Health and Learning Disability</td>
</tr>
</tbody>
</table>

The Corporate Management Team is chaired by the Western Trust’s Chief Executive and consists of eight Executive Directors. It has responsibility for ensuring the overall delivery of high quality services, the achievement of performance targets and the maintenance of appropriate clinical and social care governance standards.
The Western Trust has prepared a set of accounts for the year ended 31 March 2008 which have been prepared in accordance with Article 90(2)(a) of the Health and Personal Social Services (Northern Ireland) Order 1972, as amended by Article 6 of the Audit and Accountability (Northern Ireland) Order 2003, in a form directed by the Department of Health, Social Services and Public Safety.

The Western Trust has arrangements in place to consult with employees and their representatives. The most significant formal mechanism is based on the Western Trust’s Joint Negotiation and Consultation Forum Arrangements. This formal agreement sets down the arrangements for management and staffside partnership working in relation to consultation and negotiation on employment matters. In addition, the Western Trust has established its Joint Local Negotiating Committee. This forum focuses on employment matters relating to Doctors. The Trust has a range of partnership groups in place that allow consultation on various issues such as Agenda For Change implementation, violence at work and local change management initiatives.

The Western Trust's staff magazine NOW provides an opportunity for communicating emerging and key issues across the Trust. The Corporate Management Team has also embarked on a series of regular face-to-face staff briefings across the Trust to keep staff up-to-date.

The Western Trust positively promotes the objectives and principles of equality of opportunity and fair participation and observes all of its statutory obligations in relation to all of the Section 75 groups Northern Ireland Act (1998).

The Department requires the Western Trust to pay their non-HPSS trade creditors in accordance with the CBI Prompt Payment Code and Government Accounting Rules. Details of compliance with the Code are given on page 53.

The Western Trust participates in the HSS Superannuation Scheme and Note 1.12 of the accounts and the Remuneration Report on page 59 refers to the accounting treatment adopted.

The organisation maintains a Register of Interests covering directors and key management staff and operates procedures to avoid conflicts of interest. The Register can be viewed by contacting the Chief Executive’s Office.
The Western Trust’s External Auditor is the Comptroller and Auditor General who sub-contracted the audit to PricewaterhouseCoopers for 2007/08. The organisation was charged £81,411 for the statutory audit of the accounts (Public Funds and Endowments and Gifts).

The organisation has an Audit Committee which is a formal Committee of the Board and membership is as follows:

- Niall Birthistle  
  Non-Executive Director (Chair)

- Ciaran Mulgrew  
  Non-Executive Director

- Barbara Stuart  
  Non-Executive Director

The Audit Committee has adopted the handbook issued by the DHSSPS which details the terms of reference and the operating standards of the Committee.

All Directors have confirmed that there is no relevant audit information of which the Western Trust’s auditors are unaware. They have confirmed that they have taken the steps as directors in order to make themselves aware of any relevant audit information and to ensure that auditors are aware of that information.

### Integrated Corporate Governance

The Western Trust is committed to providing continuous improvement in the quality of services for users, staff and the public through the development and delivery of integrated corporate governance arrangements. Throughout 2007-08 the Trust fulfilled this role in a number of ways.

### Clinical Governance and Safety

The Clinical and Social Care Governance Committee, led by Non Executive Director, Mrs Sally O’Kane, met quarterly in 2007/08. Each of the Service Directorates provided updates on service quality improvement initiatives and risk management. The Committee also considered feedback from external reviews and ensured the implementation of learning from all of the reviews.

In 2008/2009, the Clinical and Social Care Governance Committee will be superseded by an Integrated Governance Committee to ensure even greater integration of all the functions which contribute to good organisational governance.

### Quality Improvement

Inspection teams from the Regional Quality Improvement Authority (RQIA) visited the Western Trust on a number of occasions in 2007/08 to conduct
themed reviews. Although final reports have not been received all summation reports indicate that the organisation is focused on a quality agenda. For example, the Paediatric Fluid Management Review carried out in April 2008 commented favourably on the Western Trust’s management guidelines for fluid administration in children and commended staff for their efforts in this work.

**Patient and Client Safety**

As part of our drive to improve the safety and quality of our services, the Western Trust has developed and implemented a Patient and Client Safety Programme. This is supported regionally through the Northern Ireland Safety Forum.

A Patient/Client Safety Leadership Group and a Steering Group were established during the year to support the implementation of the programme. Evidence based intervention teams were set up to begin to implement the Acute Myocardial Infarction (Altnagelvin Hospital), Ventilator Associated Pneumonia (Altnagelvin and Erne Hospitals) and Medicines Reconciliation (Altnagelvin Hospital) bundles of care based on the Institute of Health Care Improvement’s ‘Protecting 5 Million Lives from Harm Campaign’.

**Risk Management**

The Risk Management Strategy has been approved by Trust Board and is now being disseminated across the organisation. The Strategy contains guidance for staff on the process for risk identification, analysis, evaluation, control and review. A corporate risk register has been agreed and approved by Trust Board.

The organisation has achieved substantive compliance with the Risk Management Controls Assurance Standards. The Western Trust has continued to strengthen its Risk Management arrangements throughout 2007/08 with an increased emphasis on ‘learning lessons’ when things go wrong and when adverse incidents occur. The Governance Team is focusing on training staff on the new Western Trust wide incident reporting form. A key aspect of the training is the need to use incident reporting as a learning tool. The DATIX risk management system, a key tool to support the governance agenda is being integrated across the organisation.
Complaints and Compliments

During the year the Western Trust received 521 formal complaints and 10,070 compliments. The organisation places emphasis on providing comprehensive responses to complaints and to ensuring that every effort is made to resolve complaints locally. The remedial action taken further to complaints continues to be a key part of the service improvement process.

Audit

An audit strategy workshop was organized in December 2007 to help the organisation develop a sound auditing system that is appropriate to the structure of the organisation.

Freedom of Information (FOI)

The Western Trust received 89 requests for information which were processed in accordance with the FOI Act. Eighty-six percent of the requests were handled within the 20 day deadline. The organisation did not charge for any of the requests and none of the responses were referred to the Information Commissioner.

Claims

The Trust continues to work to ensure the timely resolution of clinical and non-clinical claims. As with complaints, much emphasis is placed on the remedial action that is taken to resolve the claims. Directorate and Divisional staff ensure that any risk management issues arising, are identified and addressed through governance procedures.
There were many challenges and priorities for the organisation in 2007/08. The main ones comprised off:

(1) Building the Western Trust

Considerable progress has been made in creating and establishing the new Western Trust in its first year. However, the scale and logistics of the merger of three separate Trusts into one single entity means that the process of harmonisation of service delivery and practice and the creation of agreed policies, procedures, systems and structures will remain a key focus for the Western Trust. A key consideration will be the roll out of the leadership and team structures across the organisation mindful of the need to drive out the challenging Review of Public Administration efficiencies in management and administration costs.

(2) Driving Forward the Reform and Modernisation of Services

The Western Trust will continue to take forward its ambitious Reform and Modernisation programme which will reshape and improve key service areas.

The organisation is committed to securing meaningful improvements in patient and client outcomes and experiences. In doing so it is determined to continue to frame the reform and modernisation programme so that responsive and appropriate care is provided by properly skilled staff in suitable settings.

Working closely with our main Commissioner of services the Western Health and Social Services Board (WHSSB), we have built and continue will build on previous service investments to ensure that the impetus for reform and modernisation is sustained.

<table>
<thead>
<tr>
<th>Elective Care Reform</th>
<th>Emergency Care Reform</th>
<th>In line with (DBS) Developing Better Services and risk and governance reviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient Services</td>
<td>Incorporating (ICATS) Intermediate Care and Treatment Services investments.</td>
<td></td>
</tr>
<tr>
<td>Mental Health Services</td>
<td>Learning Disability Services</td>
<td>In line with the Bamford Review and the local strategy - “Moving forward with health in mind”</td>
</tr>
<tr>
<td>Older People’s Services</td>
<td>Children’s Services</td>
<td>Reflecting the Care of Accommodation Strategy in line with the Family Support Strategy</td>
</tr>
</tbody>
</table>
Staff are supported and encouraged to embrace service redesign and changes in skill mix and skill substitution and the Western Trust will progress this important work in partnership with our trade union colleagues.

Wherever possible, the organisation will exploit the opportunities of technological advances to deliver accessible and responsive services and to ensure that facilities are fit for purpose. With the essential and necessary improvements in Altnagelvin and Gransha Hospitals, alongside the committed investment in new hospitals to the north of Enniskillen and in Omagh, the Western Trust will be well placed to match leading edge innovation with purpose built environments.

(3) Improving the Responsiveness of Services

Building on a very successful outturn for Priorities for Action targets in 2007/08, the Western Trust is determined to push ahead to improve timely access for patients and clients. Having secured a reduction in inpatient and day case waiting times to 21 weeks, a reduction to 13 weeks in outpatient services and similar improvements in emergency care, diagnostics and Allied Health Professional services, the challenges for 2008/09 are even greater. Similar scale challenges will be required in all key service areas. Reform and modernisation of services augmented by essential investment in capacity planning will allow the organisation and its staff to meet these demanding requirements and improve services for patients and clients. The targeted investment by the Western Health and Social Services Board as set out in its Health and Well Being Investment Plan (HWIP) will underpin and support a range of key service improvement initiatives.

(4) Financial Context

In its first year of operation the Western Trust met all of its key financial targets. These achievements were reached against an extremely difficult financial context and during the year a Contingency Plan had to be developed to enable the organisation to meet its financial target of breakeven.
<table>
<thead>
<tr>
<th>Service Area</th>
<th>Target at 31/03/08</th>
<th>Position at 31/03/08</th>
<th>Target for 31/03/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatients &amp; Day Cases</td>
<td>21 weeks</td>
<td>Achieved</td>
<td>13 weeks</td>
</tr>
<tr>
<td>Outpatients Acute</td>
<td>13 weeks</td>
<td>Achieved</td>
<td>9 weeks</td>
</tr>
<tr>
<td>Outpatients Community</td>
<td>13 weeks</td>
<td>Achieved</td>
<td></td>
</tr>
<tr>
<td>Diagnostics</td>
<td>13 weeks</td>
<td>Achieved</td>
<td>9 weeks</td>
</tr>
<tr>
<td>A&amp;E</td>
<td>95% within 4 hrs</td>
<td>93% Achieved</td>
<td>95% of patients</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>within 4 hrs</td>
</tr>
<tr>
<td>Breast Cancer</td>
<td>Urgent referrals</td>
<td>Achieved</td>
<td>Urgent referrals</td>
</tr>
<tr>
<td></td>
<td>within 14 days</td>
<td></td>
<td>within 48hrs</td>
</tr>
<tr>
<td>Fractures</td>
<td>75% within 48 hrs</td>
<td>Achieved</td>
<td>95% of patients</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>within 48 hrs</td>
</tr>
<tr>
<td>Delayed Discharges</td>
<td>Complex cases</td>
<td>87%</td>
<td>90% of complex</td>
</tr>
<tr>
<td></td>
<td>within 72 hrs</td>
<td></td>
<td>cases within 48 hrs</td>
</tr>
<tr>
<td></td>
<td>Non- complex</td>
<td>97%</td>
<td>Non complex</td>
</tr>
<tr>
<td></td>
<td>cases within 6 hrs</td>
<td></td>
<td>cases within 6 hrs</td>
</tr>
<tr>
<td>Cancer</td>
<td>31 days</td>
<td>98% within 31 days</td>
<td>Awaiting final</td>
</tr>
<tr>
<td></td>
<td>62 days</td>
<td>75% within 62 days</td>
<td>return</td>
</tr>
<tr>
<td>Learning Disability</td>
<td>7 resettlements</td>
<td>Achieved</td>
<td>60 resettlements</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(regional)</td>
</tr>
<tr>
<td>Foster Care</td>
<td>272 Foster carers</td>
<td>Achieved</td>
<td>To be identified</td>
</tr>
<tr>
<td>AHPs</td>
<td>26 weeks</td>
<td>Achieved</td>
<td>13 weeks</td>
</tr>
</tbody>
</table>
5. Capital Development Programme

Northern Sector
Capital Developments

Work on the £32million South Block 3.2A extension to Altnagelvin Area Hospital continued in 2007/08. The programme of works is scheduled to be completed in December 2008. The new build will accommodate Rehabilitation Department, Goods in/Waste out, Health Records, Staff Changing, Adult Acute Care of the Elderly 24-bed ward, Haematology/Oncology, Maternity and Neo-Natal.

Work on Phase 3.2B, an extension to the South Block, is expected to begin in June 2008. The extension will incorporate an Acute Medical Unit, Stroke Services and CCU. Construction commenced on the building of the Academic Business and Clinical Research and Innovation Facility, which is being developed in partnership with University of Ulster and Derry City Council. The facility is due to be completed in September 2008.

Southern Sector
Capital Developments

The delivery of Health and Social Care in the South West region will be transformed with an investment of £450 million to construct two state of the art hospitals. A New Acute Hospital will be built north of Enniskillen and open in early 2012, closely followed by the New Omagh Hospital Complex, planned to open in 2013.

2007/08 saw the achievement of a number of crucial milestones. For the New Acute Hospital, the year began with site preparations at Wolf Lough, and ended with the receipt of final tenders for the contract. Completion of a comprehensive evaluation process will result in the selection of a Preferred Contractor during the Summer 2008. For Omagh Hospital Complex, the year began with the advertisement for a contractor and progressed with the
short-listing of 4 high calibre bidders. To conclude a progressive year, a planning application for a new road to link the Hospital Complex with the Omagh throughpass has been lodged. The southwest hospitals will be pioneering 100% single room ward accommodation that will offer patients privacy, dignity and control over their environment and greatly assist with the control of infection.

Community Projects for the Western Area

A number of Community projects were progressed during 2007/08. These included: Lisnaskea Health and Care Centre; a new Children’s Unit in Omagh; a mental health crisis unit on the Gransha site to replace a clinic, a replacement Ballycann Unit for elderly patients with dementia and a Supported Living Unit to accommodate patients with challenging behaviours.
The Acute Directorate provides acute hospital services to the local population from three sites, at Altnagelvin in Londonderry, the Tyrone County in Omagh, and the Erne in Enniskillen. Services are managed through three Clinical Services Divisions, namely:

- Emergency Care and Medicine Division
- Surgery and Anaesthetics Division
- Diagnostics, Cancer and Clinical Support Division.

These divisions are supported by the Pharmacy Services and Hospital Sterilisation and Disinfection Unit (HSDU).

Despite the challenges the Directorate continued to focus on providing high quality services to patients. Staff were instrumental to meeting these challenges.

**Renal Services**

The Renal Unit at Altnagelvin Hospital expanded from 12 to 14 renal dialysis bed stations in the last year. This expansion enables the Western Trust to treat more patients closer to their homes. Fifty-six patients can now have their dialysis in the unit each week.

The organisation is planning to develop a renal inpatient facility due to the growing number of patients being admitted with renal problems. There are now four renal physicians working for the Western Trust and there is a well-developed renal network throughout the Western area across NI.

The Western Trust has made significant investment in state-of-the-art dialysis machines at its Renal Unit in the Tyrone County Hospital, Omagh.

Patients are dialysed in line with internationally recognised standards at both the organisation’s renal units. The performance of both units compares favourably against other similar UK units.
Cardiology

This year, cardiology services secured funding for three years from the British Heart Foundation for a second Heart Failure Nurse post. A fourth cardiologist was also appointed. Two of the Western Trust’s cardiologists are trained to carry out angioplasty (insertion of stents) and are involved in providing this service for Western Trust patients in the Belfast hospitals. It is hoped to develop this service at Altnagelvin in the future.

‘Rapid access’ chest pain clinics have also been developed over the last year, improving local access to this service for patients, including those directly referred by GPs, on all three of the Trust’s hospital acute sites. To support the clinics, a second echo and treadmill machine was purchased for the Altnagelvin site and an echo machine for the Tyrone County site.

Cardiology rehabilitation services for patients have also been increased this year.

A new service for testing suspected coronary heart disease, called Cardiac Angiography, was established at the Tyrone County Hospital in 2007/08. This is a pioneering and non-invasive technique which further improves access to high quality Cardiac Services. The service is available to patients across the Western Trust.

Accident and Emergency

Staff have been working hard during 2007/08 to reduce waiting times for patients attending A&E at Altnagelvin and Erne Hospitals, and the Urgent Care and Treatment Centre at Tyrone County Hospital.

The percentage of patients who were either discharged or admitted within four hours improved over the year. By
March 2008, 93% of patients were discharged or admitted within four hours.

These achievements demonstrate the commitment from staff to implementing new ways of working and improving patient experiences and services.

**Improving Patient Access**

The waiting times for a first outpatient appointment to see a Consultant has been reduced from six months to three months in 2007/08, and the waiting time to have a procedure or operation performed has also reduced from six months to five months.

Western Trust staff are taking forward modernisation of services to further reduce these waiting times in 2008/09. Part of the modernisation of services has been the introduction of ICATS.

**Integrated Clinical Assessment and Treatment Services (ICATS)**

ICATS have been introduced as part of the wider reform of outpatient services. They consist of new services for patients that are provided by healthcare professionals such as GPs with Specialist Interests, Nurse Specialists and Allied Health Professionals.

ICATS sits between Primary and Secondary Care to deal with the significant number of patients whose problems, while requiring a higher level of expertise than is normally available in Primary Care, do not require the expertise of a Consultant. ICATS provides a timely and effective service to a significant number of patients with less complex needs, and frees up Consultant time to spend on patients with more complex needs.

When an ICATS team assesses a patient they will do one or more of the following; provide treatment if required, advise the patient’s GP on how to treat the condition, refer the patient to a consultant or make an appointment for an x-ray or other test(s) to help make a decision about the patient’s treatment. Patients are seen in health centres, as well as hospital sites.

In November 2006 patients waiting for an orthopaedic outpatients appointment were the first to benefit from ICATS with approximately 62% of patients referred being seen by the ICATS team.

ICATS clinics also commenced in January 2008 for urology; eyes; ears, nose and throat and heart. The Western Trust is currently developing other ICATS models.
The organisation introduced an Electronic Referral Management System (ERMS) to support ICATS. The system is currently used to register all orthopaedic referral letters from GP’s within 24 hours of the hospital receiving them. The ICATS team electronically reviews the referrals within 48 hours of registration to decide if the patient can be seen by the ICATS team or if they need a consultant appointment. The system also allows GPs to establish what the stage a referral is at within the process at any point in time. It does this by providing the GP and patient with access to a call centre service based at Altnagelvin Area Hospital to enquire into the status of a referral.

**Trauma and Orthopaedics**

The Western Trust is committed to improving services for patients who suffer a fracture and has exceeded the standard set by the Minister for 75% of patients to be treated within 48 hours (99%). A significant redesign of services and commitment of staff has led to this achievement. Additional funding of £4.2 million for the Orthopaedic Service has also been secured to support the new service.

Over the next year, staff within the Trauma and Orthopaedic Unit, A&E staff, Community Rehab Teams, and the Ambulance Service will implement a redesign of the service. This project will develop improved systems for patient pre-assessment, booking and rehabilitation in the Orthopaedic Service. There will also be an increase in the number of surgeons specialising in upper limb procedures. The developments, for patients across the Western Trust using the fracture service, include improved provision of local fracture clinics, improved access for fracture surgery and the development of local rehabilitation services.

As well as more Orthopaedic surgeons there is planned recruitment of specialist nurses and occupational therapists, and staff for hospital and community services.

**Critical Care Services**

Intensive Care Services at Altnagelvin Area Hospital is provided in a five-bedded unit. High dependency care is delivered in a six-bedded adjoining unit.

There is a combined six-bedded intensive care and high dependency facility at the Western Trust’s Erne Hospital.
All staff in critical care work to provide an evidence-based, high quality service to patients. A Critical Care Forum exists to consider nursing initiatives and to develop standards. A Critical Care Outreach Programme assists in the maintenance and improvement of modern, innovative critical care practice. Two high dependancy beds were reconfigured in 2007/08 and this has led to significant improvements to the service for patients who require ventilation.

Significant investment has been secured over the next three years to support further development, including the planned appointment of a nurse consultant, and this, along with the appointment of critical care outreach post, will greatly enhance critical care services right across the Western area.

**Theatre Services**

Work commenced in 2007/08 to refurbish the Theatres in the Erne Hospital, Enniskillen. The work will ensure that the Erne Hospital has suitable Theatre facilities that meet current standards and guidelines, and from which a high quality theatre service can continue to be provided until the new hospital in the South West is opened.

In early May 2008, it is planned to pilot a computerised theatre management system in one theatre in Altnagelvin. The system will record a range of data and will provide statistical information to ensure the Western Trust is making the best use of its operating theatres. Once successfully implemented in Altnagelvin, the system will be extended to theatres in the Erne and Tyrone County Hospitals.

**Laboratory Services**

In 2007/08, the brand-new laboratory and pharmacy services building at Altnagelvin was opened. The building replaces laboratory facilities that were situated on three separate sites in the hospital.
The new laboratory facilities provide high quality work-spaces with the capacity to absorb the rapid year-on-year increases in workload, in a safe working environment for staff. They have allowed the Western Trust to exploit new technology, to facilitate new and better ways of working and to reduce turnaround times for many tests. Given the geographical location of Altnagelvin, the new laboratories also offer improved opportunities for cross border co-operation.

Laboratory services in both Tyrone County and the Erne hospitals continue to develop. External inspections of the facilities in 2007/08 have pointed to the high quality of services available.

**Cancer Services**

The Western Trust has improved its performance in providing cancer services by meeting central Government targets in 2007/08.

There has also been significant investment in cancer services to ensure that those who use the service are provided with the best possible care. Staff have now been appointed to track patient journeys through the service. This improves the patient experience by minimising delays and by ensuring rapid diagnoses and appropriate treatments.

**Radiology**

The three radiology departments in the Trust - based in Altnagelvin, Tyrone County and the Erne Hospitals - work closely together to provide the best possible radiology service for the entire patient population of the Western area.

Initiatives have been delivered in 2007/08 to improve access to Radiology Services. No patient was waiting longer than 13 weeks to access services by the end of March 2008. Patients who would have been waiting longer at Altnagelvin Area Hospital are now being seen at the Tyrone County Hospital.

A computerised radiography system is currently being installed in Altnagelvin and the Roe Valley Hospitals and will be completed in May 2008. This will mean significant improvements in efficiency, making radiology images more readily available to doctors and nurses. Such a system is already in place in the Tyrone County and Erne Hospitals.
Endoscopy

There has been considerable investment in Endoscopy Services in 2007/08. This includes the purchase of additional endoscopy equipment for the Tyrone County and Erne Hospitals.

The Western Trust is preparing for the introduction of screening for bowel cancer in 2009. This will involve reducing waiting times for endoscopy tests for all patients.

Pharmacy

The move to the new laboratory and pharmacy building at Altnagelvin Hospital was completed in April 2007. This state-of-the-art facility incorporates the use of new technology such as robotics.

Altnagelvin is the second hospital in Northern Ireland to have a pharmacy robot to dispense medication. This has resulted in reduced prescription turnaround times (86.8% within two hours), improved stock control and better use of staff. Over 1.8m issues were made from the three Pharmacy Departments during 2007/08.

The clinical pharmacy service has been further developed across the organisation. Over 10,000 patients received an integrated medicines management (IMM) service in 14 wards across the Western Trust. This service has been shown to reduce length of stay and readmission rates. ‘One stop dispensing’ has been introduced to two wards on the Altnagelvin site, resulting in faster discharge times for patients and more efficient use of medicines.

The role of pharmacy technicians has been developed, particularly in the Erne and Tyrone County Hospitals, with seven technicians achieving additional qualifications to support the development of IMM services.

Getting medicines right on admission has been shown to be key to the provision of safe and effective care and pharmacists have been leading on work in this area.

Six pharmacists qualified as independent prescribers in 2007/08 and roles have been developed in diabetes, dermatology and gastroenterology. The pharmacist-led initiative of providing insulin for patients with Type 2 diabetes on an outpatient basis in the Erne Hospital has saved patients being admitted to hospital for three to five days to start insulin
therapy. Sixty patients have received this service to date.

The development of the Radiopharmacy Service and closer working with Radiology has resulted in a very significant decrease in the length of waiting times (down from 18 months for non-routine scans in Nov 05 to four weeks Nov 07).

Hospital Sterilisation and Disinfection Unit - (HSDU)

A key achievement in 2007/08 was the opening of the centralised unit for the decontamination of endoscopes in Altnagelvin Hospital by Dame Deirdre Hine. This is the first unit of its kind in Northern Ireland and the first such unit in the United Kingdom to receive ISO 13485:2003 accreditation.

HSDU staff in Tyrone County and Altnagelvin Hospitals were the first in Northern Ireland to receive their NVQ level 3 awards in decontamination.
Research and Development

Robust and effective research and development arrangements are key to all organisations committed to excellence. The Western Trust continued in its drive to develop and extend its research and development activities in 2007/08.

A new research governance structure was put in place to serve the organisation. This was complemented by the establishment of a Research Governance Committee and a Research and Development Advisory Forum. Research governance training sessions were provided for staff throughout the 2007/08 year.

Work on the new £2.1m Academic Business Clinical Research and Innovation Facility (ABC-RIF) started in 2007-08. The “first sod” for the new building was cut on 4 April 2008 and the building should be complete by September 2008. This development [funded by Invest NI] represents a significant partnership between the Western Trust, the University of Ulster and Derry City Council. This facility will help build the Western Trust’s research capacity, attract clinical staff with research interests and enhance the culture of learning and enquiry which already exists in the organisation.

The Western Trust recruited three additional research nurses to support staff who wish to pursue research interests.

The Western Trust was well represented at the prestigious NI Healthcare Awards in 2007/08 which celebrate clinical excellence in NI. Consultant of the year was won by the Western Trust employee, Dr Frances Robinson, Anaesthetist/Palliative Care. Western Trust staff were shortlisted in seven out of the ten award categories and won three of the awards.
Medical and Dental Education

The Western Trust recognises the value of training and education for all clinicians. It is committed to undergraduate and postgraduate educational provision for the medical profession and it continued to cultivate the strong ongoing relationship with Queen’s University, Belfast and the NI Postgraduate Deanery in 2007/08.

The Western Trust showed an increase in overall student week figures and received additional funding for undergraduate and postgraduate medical education. As a result it contributed to the funding for an consultant rheumatologist post to enhance teaching capacity in that department and the recruitment of middle grade staff to facilitate consultants contributing to teaching programmes in haematology, endocrinology and medicine.

Delivery of teaching in new specialties of haematology and endocrinology to 3rd year medical students, and delivery of four Student Selected Components (Rheumatology, Cancer Management, Coeliac Disease and GI Endoscopy) has now started at Altnagelvin Area Hospital.

The landscape for the provision of postgraduate training in medicine changed substantially in 2007/08. The Western Trust is making steady progress in meeting the challenges presented by the implementation of Modernising Medical Careers. New proposals for supporting the education providers or faculty within the Western Trust were developed in 2007/08. Each specialty was set the task of matching specific curricula that will better equip young doctors to meet the future needs of the populations they serve. These programmes aim to provide greater transparency and detailed evidence of what doctors have been trained to do and what they can actually achieve.

The Western Trust is continually seeking to strengthen its links between hospital and general practice, and is now providing places for general practice training based in the Erne and Altnagelvin Area Hospitals.
A Medical Education Office was established at the Erne Hospital to support medical education activities in the southern sector of the Western Trust. Agreement has also been reached on the commissioning of a modular building at the Erne Hospital to provide teaching facilities to support undergraduate and postgraduate education activities.

An additional member of staff was appointed to the library service to support the learning agenda within the organisation and to facilitate the increase in medical students.

The Western Trust was successful in bidding for funding to run Hospital Night pilots in both Altnagelvin Area and the Erne Hospitals. Hospital at Night is a team-based approach to staffing of hospitals at night with the aim of improving the quality of care provided and the working lives of junior doctors.
8. Adult Mental Health and Learning Disability Directorate

Adult Mental Health

The establishment of the new Western Trust coincided with a period of significant change in Mental Health services both locally in the Western area and regionally. In particular, the reviews completed by the Sperrin Lakeland and Foyle legacy Trusts, “Health in Mind” and “Moving Forward” provided a roadmap for the reform and modernisation of Mental Health services in line with the Bamford Review. The new Western Trust brought together a range of services from Sperrin and Foyle which now include approximately 600 staff, a salaries and wages budget of £22 million and a comprehensive range of both hospital and community based services.

Hospital Services

The reform and modernisation agenda as outlined in the Bamford Review and local organisational reviews herald a major change in the provision of acute psychiatric in-patient services. Over the next three years, as alternatives to hospital are developed such as crisis resolution services including Home Treatment, acute hospital inpatient bed numbers will reduce. In response to this development, acute in-patient facilities at both Gransha and the Tyrone and Fermanagh will be replaced. During the 2007/08 year, the business case for the replacement of Gransha admission clinics was approved and a design team, AVANTI, appointed. Detailed design work has started and construction work on the new crisis facility is planned to commence in early 2009.

On the Tyrone and Fermanagh site, the Developing Better Services programme will see acute admission buildings and Beech Villa replaced by a new purpose built mental health resource facility. Design work on this project is at an advanced stage and both admission facilities will have been replaced by 2011/12.

Community Services

There were major changes in the structure of generic Community Mental Health Teams (CMHTs) during the 2007/08 year, as the “Moving Forward” recommendations were actioned in the Northern Sector. The five existing CMHTs in Strabane, Waterside, Shantallow, Limavady and Cityside were replaced with a range of new functionally focused services. Rehab and Recovery Teams in Londonderry, Limavady and Strabane now focus on the needs of those with severe and enduring mental illness. The Primary Care Liaison Service provides a single point of contact for all referrals from GPs and Altnagelvin Area Hospital seven days each week. The Psychological Therapies Service has pulled together a range of
psychologists, cognitive therapists and psychotherapists to provide specific interventions to those with complex psychological disorders. The new Home Treatment Team provides a home-based support service to those in crisis thus avoiding unnecessary hospital admissions.

In the Southern sector work started on the harmonisation of “Health in Mind” with the “Moving Forward” and “Bamford” Reviews. Community services continue to be delivered across the Enniskillen and Omagh areas via the two main community mental health teams and a range of residential, supported housing and day care services.

**Specialist Services**

The Adult Mental Health service continues to provide a range of specialist services including:

- **The Alcohol and Drug Service** is based at both the Gransha and Tyrone and Fermanagh sites. The service has seven beds inpatient beds at the Tyrone and Fermanagh and community teams, based at Woodlea and the Tyrone and Fermanagh providing community services across the Western area.

- **Psychosexual Services** are based at Erne House and Gransha Hospitals. This service provides a range of psychotherapeutic interventions for those who were victims of childhood sexual abuse. The service is also involved in prevention and rehabilitation with offenders and provides specialist counselling on sexual dysfunction issues.

- **Forensic Services** are based at the Tyrone and Fermanagh and Gransha sites and they provides specialist interventions for patients with serious forensic histories.

- **Trauma Advisory Panel** brings together a range of voluntary and community groups involved in providing to victims of the troubles. The panel is co-ordinated by the Mental Health programme and continues to develop training programmes and direct support for victims.
The service delivered programmes of care which:

- Promoted equality of opportunities in life for people with disabilities including integration and independence
- Focused on reducing, where possible, the prevalence and severity of disability
- Delivered a person centred service, targeted on individual needs
- Offered, where possible, choice and a balanced provision between statutory and other organisations
- Promoted and protected rights and interests of carers and;
- Educated the public and other agencies to promote understanding of the need to adapt to people with disabilities rather than the reverse.

The current statutory provision of services in this programme includes:

- Specialist Physical Disability Teams located in Londonderry, Enniskillen and Omagh
- Sensory Impairment Teams in Londonderry and in Enniskillen
- Physical Disability and Brain Injury Resource Centres in Enniskillen and Londonderry

Access Targets

During 2007/08 staff in Mental Health worked extremely hard to meet departmental access targets regarding initial assessments and referrals to specialist services such as Psychological Therapies, Addiction Services and Eating Disorders. The vast majority of initial assessments are now completed within 13 weeks of referral. This represents a significant improvement in waiting times from previous years.

Physical /Sensory Disability and Autistic Spectrum Conditions

2007/08 was clearly a developmental year for the Adult Physical and Sensory Disability Service and for the Autistic Spectrum Disorder activities. The services experienced a joining of practices from the previous legacy Trusts and the establishment of a joined up approach. The development of partnerships and sharing of expertise was key to the successful delivery of the service.

The service’s vision is to: “Recognise the valuable contribution people with disabilities can and do make as citizens. In particular we should celebrate the way they contribute to the enrichment of society through diversity.”
available resources. This will be an area of focus for the future. The Western Trust will aim to streamline processes with other programmes and ensure the application of clear service criteria, appropriate pathways for patients and agree timely protocols for discharge and transfer.

Spruce House is a significant new service addition for the Directorate. The infrastructure to support more active therapeutic rehabilitation needs will need investment and this will be a key priority for the Western Trust. Another remaining priority area for investment will be services for adults with Autism.

**Tinnitus Awareness at Calgach Centre**

Mark Durkan MP visited the Sensory Support Calgach Centre to be updated on Tinnitus Awareness in February 2008.
**Morning of Visual Awareness and Sensory Support**

Two classes of Primary 3 children and their teachers from Oakgrove Integrated Primary School, Waterside were treated to a morning of Visual Awareness in Sensory Support Service, Bishop Street. Staff at the Centre provided opportunities for them to test out specialist equipment.

Launch of Visually Impaired Football RNIB NI and IFA, came into partnership to set up Football for Blind/Visually Impaired people in NI. Fifteen visually impaired people and their families took up this opportunity to have some fun and learn some key skills whilst meeting new people in a friendly and relaxed environment.

**Adult Learning Disability**

The resettlement programme has achieved its target of seven resettlements in 2007/08. Part of this programme saw the opening of a Supported Living Unit in Limavady. This created 19 jobs in the Limavady area.

The Western Trust, in partnership with Western Health and Social Services Board, also undertook a Review of Day Opportunities provision for adults with learning disability. A two-day workshop was held in February 2008. Parents and carers attended on Day 1 and all staff working in Day Care attended on Day 2. This was the first time such a wide reaching conference was held for Day Opportunities. The output from the workshop has been developed into an implementation plan (covering the next five years) to reform and modernise day opportunities provision. This will ensure it meets future need and also maximises a partnership approach with the Community, Voluntary and Statutory Sectors.

A new Satellite Unit in Strabane opened in September 2007 providing 18 day care places for less dependent adults. The new Unit offers greater social inclusion and outreach activities. Mrs Mary McGoldrick, Senior Behavioural Therapist, based in Lakeview Hospital, received first place at the IHM Excellence in Management Awards in the Developing Manager category. This reflects the Western Trust’s commitment to continuing professional development.
The Learning Disability Programme has had inspections undertaken by the Regional Quality and Improvement Authority (September 2007) and the Mental Health Commission (February 2008). Both organisations reported a high standard of care being provided by dedicated and professional staff.

A Vulnerable Adults three day programme “Safer Lives” was delivered in the Omagh and Fermanagh areas to enable adults with a learning disability to acquire knowledge in a practical and interactive programme on safety issues such as road safety, stranger danger, home safety and fire safety. The programme was delivered in partnership with day care staff, PSNI, Local Councils and Fire and Rescue Services.

The Learning Disability Programme had visits during 2007/2008 from the Chief Medical Officer, Dr Michael McBride, and the Minister, Mr Michael McGimpsey, to meet staff and discuss issues affecting learning disability.
9. Primary Care, Older People’s Services and Nursing Directorate

**Strategic Plan**

A draft Primary Care and Older People’s Services Directorate Strategic Plan (2008-2011) has been produced. This includes details of the principles, core values, key challenges and priorities associated with the delivery of high quality health and social care services for the local population.

The plan has been closely synchronised with the organisation’s Corporate Plan and includes details of the performance and other targets to be addressed together with responsibilities and timescales for completion.

The plan is currently being reviewed by service managers and following approval the document will be used to support the Directorate’s performance management arrangements.

**Occupational Therapy Developments in Rheumatology**

During the 2007/08 year the Western Trust invested in an Occupational Therapy Rheumatology Service. Prior to this development patients who required Specialist Occupational Therapy input in Rheumatology such as hand therapy interventions and splinting, were required to travel to Belfast for treatment.

The service is now based at Altnagelvin Area Hospital and works closely with the Rheumatology Consultants, Specialist Rheumatology Nurse and other health professions. The service aims to provide quality assessments and interventions for this client group to enable them to adapt and adjust to their condition and to minimise the effects of arthritic disease on their everyday function.

**Tele-health**

The Primary and Community Care division is working toward the implementation of tele-health for service users with long-term conditions. To date three pilots are in place. The Western Trust is using the network of GP surgeries and district nursing teams to refer people in the community who are living with a long-term condition to their tele-health care service.

District nurses are trained to remotely monitor their patients on a daily basis, ensuring early detection of changes in vital signs. This enables an early intervention, which should help to prevent possible admissions to hospital or unnecessary GP visits.
Primary and Community Care Teams

A workshop was held in February 2008 to support the theme of integrated service delivery across the Directorate. Plans were identified and developed for budget and staff allocations. Further work is planned regarding the caseload allocations and alignment to GP populations within the teams.

Locality managers were tasked with the implementation of integrated service delivery and they delivered a series of presentations to local staff throughout the year. The service appointed a Head of Allied Health Professionals in 2007/08 and this will now support teams with the further integration of Allied Health Professional staff. Fourth tier recruitment is almost complete and the Directorate continues to work towards implementation of the 5th tier recruitment, which will finalise management arrangements for the teams.

Integrated Community Care Team

In October 2007, the Older People’s team consisting of Social Work staff and Nurse Care Managers joined their colleagues sharing accommodation in the new Waterside Health and Social Care Centre. This is the first step in the integration of professions in order to provide high quality fully integrated care for service users. While this integration is challenging it is an exciting time for community staff who acknowledge that the benefits of an integrated team will enhance services for patients and clients.

Infection Prevention and Control

The Directorate appointed a Head of Infection Prevention and Control in March 2008. The Western Trust’s Infection Prevention and Control Committee has met twice since December 2007. Membership is now complete and terms of reference have been agreed and ratified.

The Regulation and Improvement Authority (RQIA) visited the Trust in March 2008 to carry out an independent review of the management of patients positive for C. difficile. The
Western Trust is awaiting finalised written feedback following this preliminary visit.

**Nurse Led Rehabilitation Unit Waterside Hospital**

Between March and April 2007 wards four and five within the Waterside Hospital were reorganised to form a new Intermediate Care Service for the Northern area of the Western Trust. The wards previously provided continuing care and slow stream rehabilitation for elderly patients over 75 years of age.

This change was part of a complete redesign of service provision and is a fundamental shift to an integrated and responsive approach to service delivery. It focuses on ensuring timely support and rehabilitation to older people on discharge from acute hospital. Preventing admission to hospital and supporting people to continue to live independently within the community is and will continue to be a primary objective for the Primary Care and Older People’s Directorate.

Ward one at Waterside Hospital won the Best Kept Facility in July 2007.

“**Meeting the Needs of Older People Locally**: A strategic framework for Older People’s Care and Accommodation in the Western Area

The Western Health and Social Services Board policy on Older Person’s care and accommodation was formally adopted in December of 2007. The policy covers a ten-year period (2007-2017) and has been developed by Western Health Board and Western Trust staff over the past year. Following a process of extensive research and consultation, the document outlines eight key areas with associated targets which will inform the ongoing modernisation and redesign of services for older people and their carers in the Western Trust area.

The eight key areas are:

- Keeping Well and Active
- Accommodation
- Care and Support
- Dementia and Older People’s Mental Health
Carers

User Involvement and the contribution of voluntary/community/independent organisations

Ensuring equal access to services

Transport.

Each of these areas will see significant development in 2008/09 and beyond, and the responsible officers will keep staff and clients informed of progress.

Directorate of Nursing

A draft strategy for nursing was developed in partnership with the nursing workforce and multidisciplinary colleagues in 2007/08.

Controls Assurance - Environmental Cleanliness

A corporate steering group and two working groups representative of the acute and community services have been established. A review of the three legacy Trusts strategies is underway. Controls assurance have been completed for the 2007/08 year with moderate compliance achieved. Action plans arising out of the controls assurance exercise will drive the work agenda of the steering groups and the two working committees. Joint workshops with support services and nursing staff on the completion of the environmental cleanliness audits have been facilitated with monitoring and accountability arrangements identified.

Supervision

A supervision policy and procedures document for registrants has been developed in line with the Regional work of NIPEC. A supervision training programme has been finalised with EduCare as the main providers.

An Assistant Director has been assigned to ensure the roll out of supervision across the nursing workforce.
For the first time all services to children and their families have been brought within one coherent structure with the establishment of a Women’s and Children’s Directorate. An important decision was to include services for women as they so closely complement children’s services, in particular Paediatrics.

The main focus for the 2007/08 year was to:

- Design and implement a structure for the planning and delivery of the entire range of services to women and children

- Ensure services were maintained in a safe and effective manner during this transition phase and simultaneously

- Maximise opportunities to reform and modernise services.

While there have been challenges during the year, the Directorate is pleased to report considerable progress on all three areas.

**Healthcare**

The 2007/08 year has seen a transformation within children’s healthcare. For the first time children’s healthcare services have been actively included with all other children’s services within the Western Trust and there have been many examples of professional staff working together to achieve optimal outcomes for the children and young people within the Western area.

The Service has now appointed its senior team under the Assistant Director with:

- a Head of Service for Midwifery, Gynae and Neonatal Intensive Care Unit

- a Head of Service for Public Health and

- a Head of Service for Acute and Community Paediatrics.

Common standards are now being put in place across the various disciplines and Heads of Service are now actively progressing the modernisation agenda.

The organisation has, in 2007/08, developed a Children’s Centre at Tyrone County Hospital in Omagh. The Children’s Centre will be a consultant led unit supported by a
team of paediatric staff grades and permanent, experienced children’s trained nurses. There are regular specialist clinics at the Centre for conditions such as asthma, diabetes and epilepsy. There is also a consultant led Early Assessment Clinic to assist in the treatment of sick children.

A toy library for sensory support equipment/toys has been established in the Northern Sector and will be extended to the Southern Sector in the near future. This enables large pieces of equipment to be loaned to parents rather than purchased by them.

Altnagelvin Area Hospital was also reaccredited with the UNICEF Baby Friendly status in 2007/08. This award is given to those Trusts who actively encourage and support breast feeding within its premises.

A maternal mental health care pathway has been developed to support the role of those professionals involved with maternal mental health service provision. The framework has been designed to provide information and describe the roles of professionals who provide services before, during and after pregnancy, so enhancing the service provision to women, their partners and families.

Two additional paediatric consultants with interest in Neo-natology have been appointed.

An additional Obstetric and Gynaecology Consultant has taken up post.

The Smoking Cessation Project within Primary Care was runner up in the Institute of Healthcare Management Awards.

The Western Trust has also achieved a target set by DHSSPS in respect of its Genito Urinary Medicine (GUM) services, based at Altnagelvin Area Hospital. Patients referred to this service must be seen within two days of referral and the Trust has met this target.

Health visitors within the Trust were involved with Oakleaf GP Practice, Londonderry in a smoking cessation project and a delegation attended the British Thoracic Society Silver Jubilee Award ceremony in London to receive a commendation for this project.

[Image: Pictured at the Western Trust’s Resuscitation New Born Life Support Course held in 2007/08 are from LTR: Orla O’Kane (Western Trust SHO Atlnagelvin Hospital), Dessie Brown (Western Trust Consultant Pediatrician at Altnagelvin Hospital), Colin Robinson (Western Trust Resuscitation Service), Vvushali Nawade (SHO Paediatrician Causeway Hospital) and Adriel Stewart (Western Trust Consultant in Emergency Medicine in Omagh and Fermanagh areas).]
Family Support

2007/08 has been a significant year for Family Support services within the new Western Trust. The organisation is now well placed to develop its family support agenda for the children and young people within the Western area in a uniform and consistent manner. A new management structure has been put in place under an Assistant Director with Heads of Service being appointed for

- Gateway and Family Intervention Services
- Looked After Children and 
- Adoption, Fostering and Family Support.

The Gateway Team is now operating in line with the UNOCINI framework and are leading the field within the Region in terms of implementation of the framework. There are exciting plans ahead to improve the Gateway Service as part of the Reform and Modernisation process.

The Adoption, Fostering and Family Support Service has been particularly busy with the establishment of the Recruitment and Assessment Service across the Western area. This is part of a regional project and now means that the organisation has a dedicated team working on the recruitment and assessment of foster carers. The Western Trust is also working hard to improve the pathway for young people in care and through the care system to maximise their health outcomes and opportunities for career development and a stable, successful adulthood.

The organisation established a Children’s Resource Panel in the Southern Sector of the Western Trust and will be setting up Family Support in the new financial year. This will help to ensure that resources are targeted to those children and families most in need.

Leaving care/aftercare services have been working hard to ensure that the needs of all those young people leaving care were met in an appropriate way.

Children’s Mental Health & Disability

2007/08 has been, in many ways, a landmark year for Children’s Mental Health and Disability Services. For the first time key areas such as Child and Adolescent Mental Health Services,
Autism and Disabled Children’s Services have a dedicated voice within the Women and Children’s Directorate.

A management structure has been put in place under an Assistant Director with:

- a Head of Service for Children’s Mental Health
- a Head of Service for Disabled Children having been appointed.

The overarching objective is to work towards the full integration of these areas into children’s services.

With regard to Children’s Mental Health Services work has commenced to further strengthen the existing Child and Adolescent Mental Health Teams (CAMHS) with the appointment of a third Consultant Psychiatrist, two Staff Grade Medical Officers as well as two Specialist Eating Disorder Practitioners. The 13-week waiting list was met in line with government policy.

In respect of Autism provision, the Western Trust has appointed a Consultant Clinical Psychologist to lead up a dedicated Assessment and Diagnostic Service which will now be tasked with systematically reducing the current waiting lists. The Autism Service is currently piloting a range of befriending and innovative carer support projects with a view to providing dedicated support to families and carers.

In Learning Disability Services the Trust Board has now approved the need for a new children’s residential respite service to replace the existing Beltany House. The Western Trust now awaits final DHSS&PS approvals to proceed to build a state-of-the-art, eight bed facility that will meet the needs of children and their families particularly those who have more complex needs.

Innovative work in partnership with the Family Information Group has led to the development of an innovative DVD entitled “Who, What, Where” that provides easy to access and friendly information in respect of disability services for children and their families. The DVD, in particular, helps families navigate the Health and Social Care system. Further work is planned in this area.

The Western Trust has also commissioned a DVD to provide information on the valuable role and function of Host Carers within the Trust. This production was developed in partnership with existing host carers and at the same time provides a resource for those families who may be considering using the service.
All of the 13-week access targets for disabled children were met in 2007/08. These proved to be a considerable challenge for the organisation particularly those in respect of physiotherapy and occupational therapy.

In summary, it has been a year of significant change and steady progress within Children’s Mental Health and Disability Services. It is anticipated that the 2008/09 year will bring further reform and modernisation to ensure services continue to grow and develop.

Quality Development

A new Assistant Director of Quality Development of Social Work post was created in 2007/08 to assist the Executive Director of Social Work. This year has been an extremely busy and challenging one for social work, with the introduction of many new standards, policies and practices all within substantive organisational change. In addition to this a number of tragic events have challenged us to consider the application of good practice guidelines and update our training strategy. Throughout the 2007/08 year the Western Trust launched the ‘Social Care Governance Workbook’ and the NISCC Induction Standards. The Western Trust is actively involved in the DHSSPS initiative ‘Review of the Role of Social Work’ led by the NISCC. Principal Practitioners have been appointed for Child Protection, Court Work and Adoption. These officers have now taken up post and will play lead roles in taking forward the quality agenda within their respective disciplines.

There remains a busy agenda for quality development within the Social Services arena and this will undoubtedly carry forward to the 2008/09 year.

The Improving Quality Together Project established a Project Board in 2007/08. The Project Board is multi-disciplinary and it crosses all sectors such as Education, PSNI, Voluntary and various Programmes of Care within the Western Trust. This project has many important facets such as ensuring the implementation of the Social Services Inspectorate Overview Report; incorporating recommendations
from case management reviews; establishing links with other projects to ensure best outcomes such as Mental Health/Child Care interface; to facilitate the change process as proposed by the Reform Implementation Team; to ensure the establishment of an IT infrastructure for the successful implementation of Understanding Needs of Children in Northern Ireland. There are many sub-groups being led by dedicated individuals within the Western Trust and this will improve all children’s services for the future.

**Social Services Training Unit**

The Social Services Training Team play a key role in promoting the delivery of high quality social care services. In collaboration with relevant managers, they carry out a training needs assessment which informs a comprehensive training programme which is delivered annually.
The Directorate is made up of four departments. They are Finance, Information, Communications and Technology (ICT), Contracting and Internal Audit.

The Finance Department led on the development and implementation of a financial management framework which allowed the Western Trust to manage its £439million revenue and £37million capital budget in such a way that enabled the organisation to reach its Breakeven and Capital Resource Limit targets in 2007/08. In addition, the Department has prepared the statutory accounts which confirm the Western Trust's financial position for 2007/08 and which are summarised later in this Annual Report.

The ICT Department supported the establishment of the Trust from an ICT infrastructure perspective as well as taking forward the implementation of regional ICT projects such as the Theatre Management System and the upgrading of the Patient Administration System.

The Contracting Department managed £57million of contracts with the independent sector for health and social care services in 2007/08.

The Internal Audit Department during the year supported the work of the newly established Audit Committee.

During 2007/08, the new structures for all four departments were agreed following a comprehensive consultation process. The implementation of the new structures will be taken forward in 2008/09.
HR Strategy

The Western Trust has developed a HR Strategy describing the way in which employment issues will be addressed by the organisation. The Strategy has been developed in partnership by management and staffside representatives and was agreed by the Joint Forum at its meeting in March 2008.

The Strategy outlines the principles underpinning the way we work and the organisational and Human Resources priorities.

Establishment of Joint Negotiating Forum

The Western Trust’s Joint Negotiating Forum had its inaugural meeting in December 2007. Representatives from management and staffside are working in partnership to establish joint approaches to dealing with issues that affect Western Trust staff.

The initial priorities of the Joint Negotiating Forum were:

- development of a Human Resources Strategy for the Western Trust and agreement on priorities for 2008/09
- harmonisation of existing HR policies and procedures operated within the three legacy Trusts
- oversee the implementation of the Trust’s Policy on Zero Tolerance.

Western Trust representatives have also worked on a regional basis to develop new grievance and disciplinary procedures that have been implemented locally.

Joint Local Negotiating Committee

The first meeting of the Western Trust’s Joint Local Negotiating Committee was held in January 2008. This Forum will focus on medical staffing issues and has developed a framework for negotiation within the Western Trust.

In a similar way to the Joint Forum early priorities will include the harmonisation of policies and procedures. In addition work has commenced on clarifying the position on removing expenses for junior doctors and terms and conditions issues for medical staff.
Agenda for Change

The Western Trust is on target to meet the Health Minister’s revised deadline for completion of Agenda for Change by 30th June 2008. This will complete the matching and assimilation processes but further work is required on reviews, job evaluation and the implementation of the Knowledge and Skills Framework.

The implementation of Agenda for Change has required a significant effort on the part of Human Resources staff, Finance and payroll staff and other staff and staffside representatives who have sat on panels and staffside representatives. All of these contributors are to be commended for their diligence and perseverance in what has been one of the most significant changes in the HPSS in recent years.

Trust signs off Zero Tolerance Policy

The Western Trust launched its Zero Tolerance Policy on attacks on staff in September 2007 at Trust Board. The Policy reflects the organisation’s strong commitment to the regional campaign to stamp out attacks on staff. This will be supported with a training strategy for managers and staff aimed at preventing and dealing with attacks and the actions required after incidents. In addition, the Western Trust’s Joint Forum has established a sub group to review incidents, trends and actions taken.

Vocational Qualifications Awards

The Western Trust’s annual awards ceremony in December 2007 celebrated the achievements of 246 staff who gained NVQ qualifications in Health and Social Care and Business Administration and staff who completed Life Long Learning Courses including Essential Skills, K100 - Understanding
Health and Social Care, Realise your Potential and European Computer Driving Licence.

A special award for commitment to NVQ was made in memory of Joan Ross, Social Services Training for the second year. The award was awarded to Monica O’Neill, Technical Instructor, Physiotherapy Department, Waterside Health Centre.
Financial Targets

The Trust met the three statutory financial targets set by Government:

- To control its expenditure within its income levels;
- To achieve a 3.5% return on the assets it employs;
- To control its capital spending within the Capital Resource Limit approved by the DHSSPS.

Spending on Capital Assets

Over £6.5 million was spent in 2007/08 on capital schemes, vehicles and equipment. Expenditure on capital works schemes amounted to £33,869,000. In addition £170,000 was spent on computer equipment and £2,522,000 was spent on other equipment.

Management Costs

The Trust is required by the DHSSPS to measure each year its expenditure on management costs against definitions determined by the Audit Commission. Our management costs for 2007/08 were:

<table>
<thead>
<tr>
<th>£000</th>
<th>% of Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust Management Costs 18,628</td>
<td>4.55%</td>
</tr>
</tbody>
</table>

This indicator includes broadly the costs of the Trust Board; Corporate Function; Senior Clinical, Operational and Support Services Managers.
Public Sector Payment Policy

The DHSSPS requires Trusts to pay non HPSS trade creditors within 30 days of the receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed.

The Trust record is:

<table>
<thead>
<tr>
<th></th>
<th>2007/08</th>
<th>2006/07</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total trade bills paid</td>
<td>113,614</td>
<td>107,631</td>
</tr>
<tr>
<td>Total bills paid within the 30 day target</td>
<td>103,797</td>
<td>102,855</td>
</tr>
<tr>
<td>% of bills paid within the 30 day target</td>
<td>91.4%</td>
<td>95.6%</td>
</tr>
</tbody>
</table>

Related Parties

Following a review of the register of Interests a declaration has been made in the accounts relating to a Director of the Trust whose spouse is the Chief Executive of an organisation from which the Trust purchases care services. Full disclosure is contained within the accounts.
Summary Financial Statement

This Summary Financial Statement does not contain sufficient information for a full understanding of the activities and performance of the Trust. For further information the full Accounts and Annual Report and Auditors Report for the year ended 31 March 2008 should be consulted. Please note that the full accounts also include a Statement on Internal Control signed by the Chief Executive which assesses the internal controls operating within the Trust. If you would like to see the full set of accounts please write to:

Director of Finance
Western Health and Social Care Trust
MDEC Building
Altnagelvin Hospital Site
Glenshane Road
LONDONDERRY
BT47 6SB

Income & Expenditure for the year ended 31 March 2008

<table>
<thead>
<tr>
<th>2006/07*</th>
<th>2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>£000</td>
<td>£000</td>
</tr>
<tr>
<td>393,322</td>
<td>392,050</td>
</tr>
<tr>
<td>18,386</td>
<td>17,339</td>
</tr>
<tr>
<td><strong>411,708</strong></td>
<td><strong>409,389</strong></td>
</tr>
<tr>
<td><strong>(406,542)</strong></td>
<td><strong>(438,870)</strong></td>
</tr>
<tr>
<td>5,166</td>
<td><strong>(29,481)</strong></td>
</tr>
<tr>
<td>1,155</td>
<td>1,040</td>
</tr>
<tr>
<td><strong>(3,121)</strong></td>
<td><strong>(1,284)</strong></td>
</tr>
<tr>
<td>3,200</td>
<td><strong>(29,725)</strong></td>
</tr>
<tr>
<td><strong>(6,498)</strong></td>
<td>0</td>
</tr>
<tr>
<td><strong>(3,298)</strong></td>
<td><strong>(29,725)</strong>**</td>
</tr>
<tr>
<td>169</td>
<td><strong>(685)</strong></td>
</tr>
<tr>
<td><strong>(3,129)</strong></td>
<td><strong>(30,410)</strong></td>
</tr>
<tr>
<td><strong>(3,298)</strong></td>
<td><strong>56</strong></td>
</tr>
</tbody>
</table>

*Restated due to change in accounting procedure.  **Change in accounting procedure resulting in breakeven being calculated by adjusting for Capital Charges and other non cash costs amounting to £29,781,000
### The Balance Sheet as at 31 March 2008

#### 2006/07*

<table>
<thead>
<tr>
<th>Description</th>
<th>£000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed Assets</strong></td>
<td></td>
</tr>
<tr>
<td>315,345</td>
<td></td>
</tr>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
</tr>
<tr>
<td>3,298 Stock</td>
<td>3,746</td>
</tr>
<tr>
<td>32,792 Debtors</td>
<td>39,263</td>
</tr>
<tr>
<td>1,306 Short Term Investments and cash at bank</td>
<td>479</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>37,396</td>
</tr>
<tr>
<td><strong>Creditors: Amounts falling due within 1 year</strong></td>
<td>(52,761)</td>
</tr>
<tr>
<td><strong>Total Assets less Current Liabilities</strong></td>
<td>299,980</td>
</tr>
<tr>
<td><strong>Creditors: Amounts falling due after 1 year</strong></td>
<td>(14,289)</td>
</tr>
<tr>
<td><strong>Provision for Liabilities &amp; Charges</strong></td>
<td>(8,178)</td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td>(277,513)</td>
</tr>
<tr>
<td><strong>Financed by Capital and Reserves:</strong></td>
<td></td>
</tr>
<tr>
<td>276,909 Public Dividend Capital</td>
<td>309,409</td>
</tr>
<tr>
<td>0 Revaluation Reserve</td>
<td>12,219</td>
</tr>
<tr>
<td>604 Donation Reserve</td>
<td>510</td>
</tr>
<tr>
<td>0 Income &amp; Expenditure Reserve</td>
<td>(20,216)</td>
</tr>
<tr>
<td><strong>Total Financed by Capital and Reserves</strong></td>
<td>277,513</td>
</tr>
</tbody>
</table>

*Restated due to change in accounting procedure

---

Western Health and Social Care Trust Annual Report 2007-2008 Page 55
## Cash Flow Statement for the Year

<table>
<thead>
<tr>
<th>2006/07*</th>
<th>£000</th>
<th>2007/08</th>
<th>£000</th>
</tr>
</thead>
<tbody>
<tr>
<td>18,507</td>
<td>Net Cash Inflow from Operating Activities</td>
<td>8,812</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Returns on Investments and Servicing of Finance:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1,156</td>
<td>Interest Received</td>
<td>978</td>
<td></td>
</tr>
<tr>
<td>(2,931)</td>
<td>Interest Paid</td>
<td>(1,284)</td>
<td></td>
</tr>
<tr>
<td>(198)</td>
<td>Interest element of finance lease rental payments</td>
<td>(306)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Total:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1,973)</td>
<td></td>
<td>(306)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Capital Expenditure:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(49,503)</td>
<td>Payments to acquire Fixed Assets</td>
<td>(35,024)</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Receipts from the sale of Fixed Assets</td>
<td>39</td>
<td></td>
</tr>
<tr>
<td>(49,477)</td>
<td></td>
<td>(34,985)</td>
<td></td>
</tr>
<tr>
<td>(5,508)</td>
<td>Dividends Paid to Government</td>
<td>(6,498)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Management of Liquid Resources:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17)</td>
<td>Purchase of Investments</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>1,000</td>
<td>Sale of Investments</td>
<td>372</td>
<td></td>
</tr>
<tr>
<td>983</td>
<td></td>
<td>372</td>
<td></td>
</tr>
<tr>
<td>(37,468)</td>
<td>Net Cash Outflow before Financing</td>
<td>(32,605)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Financing:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40,100</td>
<td>New Public dividend Capital</td>
<td>32,500</td>
<td></td>
</tr>
<tr>
<td>(2,558)</td>
<td>Capital repaid to Government</td>
<td>(350)</td>
<td></td>
</tr>
<tr>
<td>74</td>
<td>Increase/(Decrease) in Cash</td>
<td>(455)</td>
<td></td>
</tr>
</tbody>
</table>

*Restated due to change in accounting procedure.
I certify that the attached Financial Statement and Annual Report were approved by the Board of Directors on 17th June 2008.

GERARD GUCKIAN
Chairman
Western Health and Social Care Trust

ELAINE WAY
Chief Executive
Western Health and Social Care Trust
STATEMENT OF THE COMPTROLLER AND AUDITOR GENERAL
TO THE NORTHERN IRELAND ASSEMBLY

I have examined the summary financial statement which comprises the Summary Income and Expenditure Account, Summary Balance Sheet and Summary Cashflow Statement.

Respective responsibilities of the Western Health and Social Care Trust Chief Executive and Auditor

The Western Health and Social Care Trust and Chief Executive are responsible for preparing the Summary Financial Statement.

My responsibility is to report to you my opinion on the consistency of the summary financial statement within the Annual Report with the full financial statements, and its compliance with the relevant requirements of the Health and Personal Social Services (Northern Ireland) Order 1972, as amended, and Department of Health, Social Services and Public Safety directions made thereunder.

I also read the other information contained in the Annual Report and consider the implications for my certificate if I become aware of any apparent misstatements or material inconsistencies with the Summary Financial Statement.

Basis of Opinion

I conducted my work in accordance with Bulletin 1999/6 ‘The auditors’ statement on the summary financial statement’ issued by the Auditing Practices Board. My report on the Western Health and Social Care Trust’s full annual financial statements describes the basis of my audit opinions on those financial statements and the part of the Remuneration Report to be audited.

Audit Opinion

In my opinion, the summary financial statement is consistent with the full annual financial statements of the Western Health and Social Care Trust for the year ended 31 March 2008 and complies with the applicable requirements of the Health and Personal Social Services (Northern Ireland) Order 1972, as amended, and Department of Health, Social Services and Public Safety directions made thereunder.

JM Dowdall CB
Comptroller and Auditor General
Northern Ireland Audit Office
106 University Street
BELFAST BT7 1EU

26th June 2008
WESTERN HEALTH AND SOCIAL CARE TRUST
REMUNERATION REPORT

1. Fees and allowances payable to the Chairman and other Non-Executive Directors are as prescribed by the Department of Health and Social Services and Public Safety.

2. The Remuneration and other terms and conditions of Senior Executives are determined by the Remuneration and Terms of Service Committee. Its membership includes:

   Mr Gerard Guckian, Chairman
   Mrs Joan Doherty, Non Executive Director
   Mr Niall Birthistle, Non Executive Director
   Mrs Sally O’Kane, Non Executive Director
   Mrs Stella Cummings, Non Executive Director

   The recommendations of the Remuneration and Terms of Service Committee are ratified by a meeting of all the Non Executive Directors. The Terms of Reference of the Committee are based on Circular HSS (PDD) 8/94 Section B.

3. For the purposes of this report the pay policy refers to Senior Executives and is based on the guidance issued by the Department of Health and Social Services and Public Safety on job evaluation, grades, rate for the job, pay progression, pay ranges and contracts.

4. Pay progression is determined by an annual assessment of performance by the Remuneration Committee advised by the Chief Executive for Senior Executives and by the Chairman for the Chief Executive. The performance management system is based on organisational and personal objectives.

5. Each year an inflationary uplift is applied to the pay ranges. Performance related pay is applied to those individuals whose performance is rated as being fully acceptable or better. No award is made for unsatisfactory performance. These arrangements are issued to the Trust by circular from the Department of Health and Social Services and Public Safety. The contracts for Senior Executives are permanent and provide for three months notice. There is no provision for termination payments other than the normal statutory and terms and conditions requirements.

Elaine Way
Chief Executive
17 June 2008
### Senior Executives Remuneration

The Senior Executives remuneration (excluding employer’s contribution to National Insurance) for the year were:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Salary including Performance Pay</th>
<th>Benefits in Kind (rounded to nearest £100)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2007/08 £000</td>
<td>2007/08 £</td>
</tr>
<tr>
<td><strong>Non-Executive Directors</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mr G Guckian</td>
<td>Chairman</td>
<td>25-30</td>
<td></td>
</tr>
<tr>
<td>Mrs J Doherty</td>
<td>Non-Executive Director</td>
<td>5-10</td>
<td></td>
</tr>
<tr>
<td>Mrs S Cummings</td>
<td>Non-Executive Director</td>
<td>5-10</td>
<td></td>
</tr>
<tr>
<td>Mrs S O’Kane</td>
<td>Non-Executive Director</td>
<td>5-10</td>
<td></td>
</tr>
<tr>
<td>Mr C Mulgrew</td>
<td>Non-Executive Director</td>
<td>5-10</td>
<td></td>
</tr>
<tr>
<td>Mr B McCarthy</td>
<td>Non-Executive Director</td>
<td>5-10</td>
<td></td>
</tr>
<tr>
<td>Mr N Birthistle</td>
<td>Non-Executive Director</td>
<td>5-10</td>
<td></td>
</tr>
<tr>
<td>Mrs B Stuart</td>
<td>Non-Executive Director</td>
<td>5-10</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Executive Members</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mrs E Way*</td>
<td>Chief Executive</td>
<td>105-110</td>
<td>1,500</td>
</tr>
<tr>
<td>Mr J Doherty**</td>
<td>Director of Women and Children’s Services</td>
<td>85-90</td>
<td></td>
</tr>
<tr>
<td>Mrs L Mitchell**</td>
<td>Director of Finance, ICT and Contracting</td>
<td>70-75</td>
<td></td>
</tr>
<tr>
<td>Mr A Finn***</td>
<td>Director of Primary Care and Older Peoples Services</td>
<td>75-80</td>
<td>2,000</td>
</tr>
<tr>
<td>Dr A Kilgallen</td>
<td>Medical Director</td>
<td>95-100</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Other Board Members</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mr J Lusby**</td>
<td>Deputy Chief Executive and Director of Planning and Performance Management</td>
<td>85-90</td>
<td></td>
</tr>
<tr>
<td>Mrs N Sheerin**</td>
<td>Director of Human Resources</td>
<td>65-70</td>
<td>1,000</td>
</tr>
<tr>
<td>Mr T Millar</td>
<td>Director of Adult Mental Health and Disability Services</td>
<td>55-60</td>
<td></td>
</tr>
<tr>
<td>Mrs M Kelly</td>
<td>Director of Acute Services</td>
<td>70-75</td>
<td>2,000</td>
</tr>
<tr>
<td>Real increase in pension and related lump sum at age 60 £000</td>
<td>Total accrued pension at age 60 and related lump sum £000</td>
<td>CETV at 31st March 2006 £000</td>
<td>CETV at 31st March 2007 £000</td>
</tr>
<tr>
<td>-------------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
<td>----------------------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>2.5-5.0</td>
<td>160-165</td>
<td>609</td>
<td>665</td>
</tr>
<tr>
<td>0-2.5</td>
<td>130-135</td>
<td>506</td>
<td>552</td>
</tr>
<tr>
<td>2.5-5.0</td>
<td>75-80</td>
<td>222</td>
<td>247</td>
</tr>
<tr>
<td>2.5-5.0</td>
<td>110-115</td>
<td>366</td>
<td>404</td>
</tr>
<tr>
<td>2.5-5.0</td>
<td>20-25</td>
<td>52</td>
<td>73</td>
</tr>
<tr>
<td>0-2.5</td>
<td>145-150</td>
<td>531</td>
<td>577</td>
</tr>
<tr>
<td>0-2.5</td>
<td>100-105</td>
<td>337</td>
<td>369</td>
</tr>
<tr>
<td>0-2.5</td>
<td>60-65</td>
<td>202</td>
<td>225</td>
</tr>
<tr>
<td>0-2.5</td>
<td>85-90</td>
<td>310</td>
<td>341</td>
</tr>
</tbody>
</table>
Note 1: As Non-Executive Members do not receive pensionable remuneration, there will be no entries in respect of pensions for Non-Executive Members.

Note 2: 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 the scheme and chooses to transfer the benefits accrued in their 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 include the value of any pension benefits in another scheme or arrangement which the individual has transferred to the HSS pension scheme. They also include any additional pension benefit accrued to the member as a result of their purchasing additional years of pension service in the scheme at their own cost. CETVs are calculated within the guidelines and framework prescribed by the Institute and Faculty of Actuaries.

Note 3: Real Increase in CETV - this reflects the increase in CETV effectively funding 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.

Note 4: Some of the Senior Executives held posts as Senior Executives within the legacy Trusts and their remuneration details for 2006/07 are disclosed within the 2006/07 annual accounts for those organisations:

* Altnagelvin Hospitals HSS Trust details can be obtained from www.westerntrust.hscni.net

** Foyle HSS Trust details can be obtained from www.westerntrust.hscni.net

*** Down & Lisburn HSS Trust details can be obtained from www.setrust.hscni.net
Note 5: All amounts are audited by the Trust’s External Auditors

Note 6: In 2007/08 4 former Directors from the predecessor Trusts were given voluntary early retirement on the grounds of redundancy. Early retirement benefits which include pension payments and lump sum, plus redundancy payments where applicable were paid in accordance with contractual entitlements. Details are listed below:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Trust</th>
<th>Date Employment Ceased</th>
<th>£000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr N Smyth</td>
<td>Director</td>
<td>Altnagelvin Hospitals HSS Trust</td>
<td>2 Aug 2007</td>
<td>190-195</td>
</tr>
<tr>
<td>Miss I Duddy</td>
<td>Director</td>
<td>Altnagelvin Hospitals HSS Trust</td>
<td>30 June 2007</td>
<td>130-135</td>
</tr>
<tr>
<td>Mrs P Mahon</td>
<td>Director</td>
<td>Foyle HSS Trust</td>
<td>30 June 2007</td>
<td>155-160</td>
</tr>
</tbody>
</table>

Note 7: One of the former Directors submitted reasons for non-disclosure and under the Data Protection Act this request has been upheld.
For further information about the Western Health & Social Care Trust please contact:

The Western Health and Social Care Trust
Trust Headquarters
Altnagelvin Area Hospital
Glenshane Road
BT47 6SB

Telephone: 71345171