Background

The Western Health and Social Care Trust aims to: “Provide high quality patient and client focused health and social care services through well trained staff with high morale”. The Trust provides a comprehensive range of health and social care services across the five council areas of Limavady, Londonderry, Strabane, Omagh and Fermanagh.

The Trust employs approximately 12,000 staff and spends £500 million annually in the delivery of its services.

This annual report reflects the services provided by the Western Health and Social Care Trust during the course of the year ended 31 March 2014. It very much builds on progress made in previous years in providing better outcomes for patients and clients as well as improved access to our services. The detail contained within this report gives a real sense of the scale of services delivered to communities throughout the Trust together with the respective performance outcomes. A number of innovations, improvements and externally validated awards are described to demonstrate the efforts that our staff make to improve services. None of these achievements would be possible without the unstinting commitment of staff across the Trust in both hospital and community settings who on a daily basis aspire to do the very best for patients and clients. Notwithstanding the realities of a challenging financial environment we give you absolute assurance that as the leaders of the Trust we will continue to support staff to achieve the very best for all service users. Given the scale of health and social care provision there are a number of areas where we can and will secure improvement.

In addition to the fact the 2013/14 year has been another busy and challenging year for the Trust we have dealt with a number of exceptional events. First with the G8 World Leaders event being hosted in Co Fermanagh, the South West Acute Hospital in Enniskillen was identified as the local receiving hospital dealing with visiting delegations. Significant numbers of additional staff were recruited and trained and a series of exceptional measures were implemented to ensure the safety of all staff, visitors and patients.

As a Trust Board we are deeply concerned and aware of the continued financial cost pressures during 2013/14 which meant that we were not able to meet our statutory duty to break even. Given the substantial growth in demand and complexity of certain services together with staff vacancies it will be important that the Trust continues to work closely with the Health & Social Care Board / LCG as the commissioner of our services.

We wish to place on record our thanks to all of our staff who every day go the extra mile to provide such high quality care.

As the Trust improves services it is important that our buildings infrastructure keeps pace with the requirements of the 21st century. Therefore it is extremely important to highlight that during the course of the year we invested £38.3 million on capital work schemes as well as replacement vehicles and equipment. With tendering ongoing in terms of Altnagelvin’s North Wing replacement, the creation of the new Radiotherapy Centre and the new Omagh Enhanced Local Hospital we look forward to these essential developments coming on stream in future years.

The Trust experienced a number of financial cost pressures during 2013/14 which meant that we were not able to meet our statutory duty to break even. Given the substantial growth in demand and complexity of certain services together with staff vacancies it will be important that the Trust continues to work closely with the Health & Social Care Board / LCG as the commissioner of our services.

As a Trust Board we are deeply indebted to all the members of our Trust Board especially our Non-Executive Directors who have provided consistent, strong leadership during the past year.

Finally as Chairman, I acknowledge that this is the final annual report that I will present as my second term finishes on 31 July 2014. I feel honoured and privileged to have held this role for 8 years, since the Trust was formed. At the outset we adopted the aim of providing high quality patient and client care, delivered by well trained staff with high morale, and I firmly believe that we have been true to this aim. The quality of our care has improved year on year due to the exceptional efforts of all the teams and individuals who are dedicated to the care of patients and clients every day.

I leave the Trust with an encouragement to further pursue the raising of staff morale - there is no doubt that better care is delivered when staff are happy and we should do everything we can to enable our staff to enjoy, and feel appreciated for, the outstanding work they do. I thank everyone for their support during the past 8 years and I wish the Trust well for the future.

Gerard Guckian
Chairman

Elaine Way CBE
Chief Executive
The Western Trust is managed by a Board comprised of the following:

<table>
<thead>
<tr>
<th>NAME</th>
<th>POSITION ON THE BOARD</th>
</tr>
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<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</td>
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<tr>
<td>Ciaran Mulgrew</td>
<td>Non-Executive Director</td>
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<tr>
<td>Joan Doherty</td>
<td>Non-Executive Director</td>
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<tr>
<td>Stella Cummings</td>
<td>Non-Executive Director</td>
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<tr>
<td>Brendan McCarthy</td>
<td>Non-Executive Director</td>
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<tr>
<td>Barbara Stuart</td>
<td>Non-Executive Director</td>
</tr>
<tr>
<td>Elaine Way</td>
<td>Chief Executive</td>
</tr>
<tr>
<td>Joe Lusby</td>
<td>Deputy Chief Executive</td>
</tr>
<tr>
<td>Kieran Downey</td>
<td>Executive Director of Social Work / Director of Women and Children’s Services</td>
</tr>
<tr>
<td>Alan Corry Finn</td>
<td>Executive Director of Nursing / Director of Primary Care and Older Peoples Services</td>
</tr>
<tr>
<td>Trevor Millar</td>
<td>Director of Adult Mental Health and Disability Services</td>
</tr>
<tr>
<td>Dr Anne Kilgallen</td>
<td>Medical Director (from 1 April 2013 until 21 June 2013)</td>
</tr>
<tr>
<td>Mr Alan McKinney</td>
<td>Medical Director (from 17 June 2013 until 31 March 2014)</td>
</tr>
<tr>
<td>Lesley Mitchell</td>
<td>Director of Finance and Contracting</td>
</tr>
<tr>
<td>Nuala Sheerin</td>
<td>Director of Human Resources</td>
</tr>
<tr>
<td>Sara Groogan</td>
<td>Director of Performance and Service Improvement (from 1 April 2013 to 26 August 2013)</td>
</tr>
<tr>
<td>Teresa Molloy</td>
<td>Director of Performance and Service Improvement (from 1 November 2013 to 31 March 2014)</td>
</tr>
<tr>
<td>Alan Moore</td>
<td>Director of Strategic Capital Development</td>
</tr>
<tr>
<td>Geraldine Hillick</td>
<td>Director of Acute Services (from 1 April 2013 to 31 July 2013)</td>
</tr>
<tr>
<td>Geraldine McKay</td>
<td>Director of Acute Services (from 15 July 2013 to 31 March 2014)</td>
</tr>
</tbody>
</table>

The Western Trust has established a Joint Forum which is a formal mechanism for managing and resolving employment matters relating to doctors. The Trust has a range of partnership groups in place which allow consultation on pay issues and reform and modernisation proposals.

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

The Department requires the Trust to pay their non-HSC trade creditors in accordance with the CBI Prompt Payment Code and Government Accounting Rules. Details of compliance with the Code are given on page 15.

The Trust participates in the HSC Pensions Scheme and Note 3 in the full accounts document and the Remuneration Report refer to the accounting treatment adopted.

The Trust maintains a Register of Interests covering directors and key management staff and operates procedures to avoid any conflict of interest. On the basis of a review of this Register it has been confirmed that none of the Board members, members of the key management staff or other related parties had undertaken any material transactions with the Western Health and Social Care Trust. The Register can be viewed by contacting the Chief Executive’s Office.

The Trust has prepared a set of accounts for the year ended 31 March 2014 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 Trust has arrangements in place to consult with employees and their representatives. The most significant formal mechanism is the Trust’s Joint Forum. This is governed by a formal agreement which sets down the arrangements for management and Trade Union Side partnership working in relation to consultation and negotiation on employment matters. In addition the Trust has established a Joint Local Negotiating Committee.

The Trust has arranged for the full accounts of the Trust to be audited by KPMG for the year ended 31 March 2014. The Trust was charged £62,000 for the statutory audit of the accounts (Public Funds and Endowments and Gifts).

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

Niall Birthistle
Non-Executive Director (Chair)

Barbara Stuart
Non-Executive Director

Ciaran Mulgrew
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 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 the Trust’s auditors are aware of that information.

The Trust reported four personal data related incidents to the Information Commissioner’s office in 2013/14. The details can be found in the Trust’s Governance Statement starting on page 50 of the full accounts document.

The Trust has developed a diversity and equality policy based on the objectives and principles of equality of opportunity and fair participation and observes its statutory obligations in relation to all of the Section 75 groups in the Northern Ireland Act (1998).

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Key Facts

- In 2013/14 there were 58,703 attendances at Altnagelvin’s Emergency Department, 30,042 attendances at the South West Acute Hospital Emergency Department and 17,537 attendances at the Urgent Care and Treatment Centre at the Tyrone County Hospital.
- Allied Health Professionals (AHP) services provided over 330,415 face-to-face contacts with clients during 2013/14.
- District nursing services provided approximately 201,851 contacts with clients during 2013/14.
- There were 3,948 births at Altnagelvin Hospital and the South West Acute Hospital.
- The number of compliments for 2013/14 was 2,596, and the number of formal complaints received was 495. There was a total of 15 Children Order Complaints.
- In 2013/14 the Trust Library Service had 24,862 visits from staff and students. It issued, supplied and renewed 4,109 books and articles. The Library Service delivered 97 induction information sessions, training sessions to 977 staff and students and carried 110 detailed literature searches to support patient care, education and research.
- The Finance Department’s Capital Costing and Efficiency Division supported 217 business cases amounting to £1.661m.
- The Finance Department processed over 122,000 invoices.
- The Trust's website was visited by 296,010 people and pages were viewed 1,441,949 times. The Trust added 42 clips on our YouTube channel resulting in 53,457 views. In 2013-14 an additional 1,404 people started following the Trust’s Facebook channel.
- The Western Trust’s Communications Office issued 204 press releases in 2013/14.
- In year 2013/14 Clinical staff within the Trust made a total of 241 referrals to the Remote Telehealth Service.

Management Commentary

- Achievement of Ministerial Priorities
  During 2013/14, the Western Trust continued to build on progress made in previous years in the development and improvement of key services in order to improve the health and wellbeing of its resident population and provide better access to high quality health and social care services.
  The Trust was challenged to meet the required standard on some specialties for a range of reasons, including levels of demand exceeding those anticipated and planned for, in year difficulties delivering the planned levels of capacity in house, and the affordability of significant additional capacity from the Independent Sector. Additionally, the Trust worked to complete the full recovery following the Altnagelvin fire, which had significantly impacted its capacity for orthopaedics services since November 2012.

- Key Achievements during 2013/14
  1. Cancer Services
     From April 2013 to March 2014, 98% of urgent breast cancer referrals were seen within 14 days.

     From April 2013 to March 2014, 99.9% of patients received their first definitive treatment within 31 days of a decision to treat.

     From April 2013 to March 2014, 90.3% of patients urgently referred with a suspected cancer began their first definitive treatment within 62 days.

  2. Elective Access
     Outpatients
     By the end of March 2014, 79.5% of patients waited nine weeks or less for access to an outpatient appointment, against a required standard of 80% at March 2014.

     The Trust has achieved the maximum waiting time standards in Urology, Orthodontics, Haematology, Palliative Medicine, Cardiology, Dermatology, Nephrology, Care of the Elderly, Clinical Oncology, Chemical Pathology, Endocrinology, Diabetes, Respiratory, Orthopaedics (Adults), Paediatrics (excluding Paediatric Cardiology) and Gynaecology.

     The Trust was not able to meet this required standard in ENT, Ophthalmology, Pain Management, Rheumatology, Gastro, Paediatric Orthopaedics, General Surgery, Oral Surgery, Neurology, Paediatric Cardiology and Community Paediatrics.

     Patients and Day Case
     By the end of March 2014, 72% of patients waited 13 weeks or less for access to planned Inpatient or Day Case treatment against a required standard of 80% at March 2014.

     The Trust has achieved the maximum waiting time standard in Endoscopy, Cardiology, Urology, General Medicine, Community Dentals and ENT.

     The Trust was not able to meet this required standard in Pain Management, Ophthalmology, Oral Surgery, Gynaecology, General Surgery and Orthopaedics.

  3. Fractures
     From April 2013 to March 2014, 99.7% of patients received their first definitive treatment for Wet AMD.

     In March 2014, 99% of routine diagnostic tests were reported in two weeks.

  5. Diagnostics
     In March 2014, 99% of routine diagnostic tests were reported in two weeks.

- By the end of March 2014, no patient was waiting more than nine weeks for a day case endoscopy, meeting the required standard for this service.

- Delayed Discharges
  By March 2014, 91% of complex discharges from an acute hospital took place within 48 hours, exceeding the required standard.

- Childrens Services
  In March 2014, the number of care leavers aged 19 in education; training or employment had increased to 78%, exceeding the target of 75%.

  During the year, all child protection referrals were allocated within 24 hours of receipt and all initial assessments were completed within ten working days, against a backdrop of increasing levels of demand for these services.

- Mental Health Services
  The Trust out-turned excellent performance in these services, and by end March 2014;

  - No patient was waiting more than nine weeks for assessment and treatment for Adult Mental Health Services

  - No child waited more than nine weeks to access child and adolescent or adult mental health services

  - No patient was waiting more than 13 weeks from referral to commencement of treatment for Psychological Therapy.

- Community Care
  By end of March 2014, no patient with continuing care needs was waiting longer than eight weeks for the main components of their care needs to be met.

  From April 2013 to March 2014 the Trust significantly exceeded the target to deliver Telemonitoring Services and Telecare monitored patient days, with almost 100,000 monitored patient days delivered against a target of 86,000.

- Stroke Services
  By end of March 2014 the target of 10% was exceeded with 12% of all ischaemic stroke admissions receiving thrombolysis.

- Direct Payments
  By the end of March 2014 the number of Direct Payment cases increased by 11%.
The Acute Services Directorate has continued to provide high quality patient care during the year.

Pharmacy and Hospital Decontamination and Serialisation Departments

Carmel Darcy, Consultant Prescribing Pharmacist, has been focusing on the pharmaceutical care of patients in the Waterside Hospital and the follow-up of 30 days after patient discharge. This innovative new work has won a number of awards during the year and Carmel was named Northern Ireland Hospital Pharmacist of the Year at the NI Healthcare Awards in February 2014.

Pharmacists have been developing their prescribing roles in many specialities. There is now a specialist Diabetes Pharmacist working in Outpatients at the South West Acute Hospital and a Specialist Oncology Pharmacist prescribing chemotherapy in oncology Outpatients in Altnagelvin – another first in Northern Ireland.

Hospital Sterilisation and Decontamination Unit

The ‘International Organisation for Standardisations’ accreditation was renewed for the Hospital Sterilisation and Decontamination Unit (HSDU) and Endoscopy Decontamination unit in the Tyrone County Hospital during the year. A new Endoscopy Decontamination Unit was commissioned in Altnagelvin in July 2013. New decontamination equipment was installed on both sites.

Surgery and Anaesthetics Division

The Trauma and Orthopaedic Unit received national recognition from the National Hip Fracture Database (NHFD). Altnagelvin Hospital came top in Northern Ireland in relation to operating on hip fracture patients within 48 hours of admission.

The division was delighted that a number of staff were recognised over the year, as follows:-

Staff Nurse Deirdre Harkin was recognised recently at the Dementia Achievements Conference, where she was presented an ‘Education to Practice’ award. Deirdre won this award for initiatives which helped make Trauma and Orthopaedics a Dementia friendly unit.

The Royal College of Nursing (RCN) ‘Chief Nursing Officer Award’ was awarded to staff nurses Victoria McCrory and Deirdre Harkin, Trauma and Orthopaedics for Dementia Care.

Mary Lafferty, Assistant Nursing Services Manager, Trauma and Orthopaedics, won the GAIN ‘Best Service Improvement Award’ for dementia care.

The Critical Care Outreach Team received a Quality and Safety Award at the annual Trust Staff Recognition Awards ceremony.

Carla McClintock, University of Ulster student nurse was awarded both RCN Northern Ireland Student Nurse of the Year and the national Nursing Times Most Inspirational Student Award.

Emergency Care and Medicine Division

Advances within the Acute Medical Unit (AMU) have seen the development and completion of an ambulatory care clinic which will provide clients to have a dedicated slot for diagnostics followed by senior review on further management of their clinical condition.

Access Targets

The Emergency Department four hour standard target has proved a challenge. The Trust has plans to review Emergency Department patient flow and overall patient flow at both Altnagelvin and South West Acute Hospitals.

Nurse Staff Levels for Single Room

Following a workforce review of staffing levels within the wards at the South West Acute Hospital, the commissioner has funded additional nursing resources to meet the service need.

FLOW

Bed management has been developed to improve the patient flow throughout the hospital with the introduction of the new FLOW (White Board) system which will interface with a variety of other IT systems to provide real live data. This will allow for accurate and timely decision making and will ensure that the patient is placed in the right environment to meet their individual needs.

Home Therapies

The development of the Home Therapies Team is progressing to ensure that the patient is placed in the right environment to meet their individual needs.

PCI

Percutaneous Coronary Intervention (PCI) Cardiology has secured funding for additional catherisation laboratory sessions and these are being delivered. MINAP nurses for northern and southern sector were appointed and a project manager was appointed for cardiology for the Primary PCI.

Diagnostics and Cancer Services Division

Endoscopy

At the end of July 2013 Endoscopy Services relocated to a new unit in the South Wing, Altnagelvin. This new facility offers a high quality, patient centred service in a modern, state-of-the-art environment.

Radiography

The capital replacement programme in radiology funded by the Strategic Asset Management of Medical Devices (SAMMD) saw a number of projects completed.

This included: the installation of CT/SPECT camera and replacement of the Interventional room in Altnagelvin; the commencement of the replacement of radiology equipment in the Tyrone County Hospital (in preparation for the move to the new hospital in 2016). This includes a new Direct Digital Radiography (DDR) system, Digital Dental equipment, Orthopan Unit and mobile DDR unit. The completion of the review of Imaging Services (fluoroscopy) was finalised which saw the decommissioning of two fluoroscopy rooms.

The Western Trust also delivered the regional business case for the introduction of Digital Mammography for all of Northern Ireland including a fleet of seven mobile breast screening units with disabled access. This will see new static digital mammography units installed in the Breast Screening Unit and two mobile breast screening units for the Trust.
raise awareness of the difficulties people with deaf blindness and to wide to assist in the identification of Staff training has been provided Trust (June 2014) to identify the needs of people a regional project (Completion June 2012). The Trust has appointed for Spruce House with a minor or moderate brain injury. The Acquired Brain Injury Service has been appointed for Spruce House and is in the process of recruiting an Occupational Therapist.

**Acquired Brain Injury Service**
The Acquired Brain Injury Service has continued development in response to regional brain injury standards. The Community Brain Injury Service (CBIS) has appointed a nurse and two rehabilitation support workers to advise and support those with a minor or moderate brain injury. An additional Occupational Therapist has been appointed for Spruce House inpatient services.

**Sensory Services**
Sensory Services have appointed additional staff to support the sensory rehabilitation work of the Community Sensory teams. The Trust is leading a regional project (Completion June 2014) to identify the needs of people in Northern Ireland who have a combined hearing and visual loss. Staff training has been provided Trust wide to assist in the identification of people with deaf blindness and to raise awareness of the difficulties they experience.

**Day Care and Day Opportunity Services**
As part of the review and development of day care / opportunity services for adults with physical / sensory disability, the Trust successfully recruited community access workers to provide support to adults who do not wish to attend a traditional day care facility but wish to access employment, training and social opportunities within their local communities. This builds on work piloted by the Trust as part of the Cross Border and Working Together Citizenship (CAWT) project and supports implementation of recommendations contained within the Regional Disability Strategy.

**Adult Mental Health Services (AMHS)**

**Official Opening of Grangewood Mental Health Crisis Unit**
Grangewood Mental Health Crisis Unit was officially opened by the Health Minister, Mr Edwin Poots, on 17 December 2013. This event was attended by the Trust Chairman, Chief Executive, representatives from the Trust, community, voluntary and statutory organisations, service users and carers.

**Implementing Recovery Through Organisational Change**
The ImROC programme was initiated within Adult Mental Health services in May 2013. The Trust has committed to three organisational challenges and a Steering Group comprised of staff from each service, voluntary sector and service users are leading on this transformational change. The award winning innovation ‘My Mind’ Smartphone App and the Recovery Ethos will be officially launched in 2014.

**Resettlement Plans**
Within Adult Mental Health services, the Trust resettlement plans are progressing well, consistent with the goal of closing long stay hospital facilities by 2015.

**Adult Learning Disability**

**Irish News Workplace and Employment Awards 2013**
The ‘Access to Citizenship Project’ was highly commended in the Disability Best Practice Employer category at the Irish News Awards 2013 ceremony. This social inclusion project is funded by the European Union’s INTERREG IVA programme and the award reflects the effort and commitment of everyone involved.

**VOCAI Advocacy Group**
From 10 June 2013, a two year contract was awarded to the Vocal Advocacy Group to provide independent advocacy services for adults with a learning disability. This includes those who are at risk of being discriminated against or excluded from major decisions that affect their lives and who require support in relation to decisions about their health and well-being.

**Day Care Consultation**
The Health and Social Care Board (HSCB) lead a public consultation to consider a regional model which sets out the need to improve day centres and community based day opportunities for people with complex healthcare and behavioural support needs. As part of the consultation in November 2013, the Trust engaged in HSCB arranged public meetings.

**Health Improvement Strategy**
The Adult Learning Disability sub-directorate has engaged Health Promotion colleagues, the Public Health Agency and University of Ulster to develop a Rapid Health Promotion Strategy for adults with a learning disability. This strategy will include identifying the health issues amongst the learning disability population and devising an action plan to improve the health of the target group.
Primary Care and Older People’s Services Directorate

Hilary Curry Cup

District Nurse, Sister Eileen Doherty, based in Castlederg was presented with the Hilary Curry Cup in recognition of her outstanding care to people living with cancer in the community.

Eileen dedicated her award to the team she works within.

Older People’s Mental Health – Service Improvement Project

The Directorate is in the process of reforming and modernising its older people’s Mental Health Service. A multi-agency project board and four working groups were set up to lead on the development and implementation of a service improvement plan.

Key actions to date have included the delivery of a training programme on dementia and older people’s mental health to a wide range of Trust staff in both community and hospital settings. Funding from the Public Health Agency enabled awareness raising events and the production of local information booklets, as well as a range of therapeutic programmes/events for carers and service users. A directory of dementia and older people’s Mental Health Services was produced and circulated to GPs. In addition environmental improvements were taken forward in mental health wards to ensure they are in keeping with good dementia design practice.

A proposal to redesign the inpatient and community older people’s Mental Health Services has been drafted and shared with staff. The model will go forward for consultation with key stakeholders. The Directorate will continue to progress this important service improvement project.

Clinical Intervention Centre

The Trust welcomed Edwin Poots, Minister for Health, to a series of engagements in the Omagh and Fermanagh area, which included a visit to the Directorate’s new Clinical Intervention centre at the Tyrone County Hospital, operated by the Rapid Response Service. The Rapid Response Service works closely with hospital consultants and GPs to determine the treatments required to maintain patients within their local community, which may otherwise necessitate admission or extend the person’s stay in the acute hospital setting. The Directorate plans to provide two further intervention centres in Fermanagh and Londonderry.

Older Persons’ Assessment and Liaison Service (OPALS)

The Directorate has successfully introduced an Older Persons’ Assessment and Liaison Service that provides comprehensive screening assessment to people 75 years and older within the Medical and Care of the Elderly wards and at the Emergency Department in Altnagelvin Area Hospital. There are plans to duplicate this service model in the South West Acute Hospital during 2014/15.

The Directorate has also introduced a Rapid Access Clinic that enables GPs to refer clients aged 75+ years to the team in Altnagelvin for full comprehensive assessment to reduce the need for admission to hospital. There are plans to duplicate this service in the South West Acute Hospital during 2014/15.

Paediatric Lymphoedema Management

Lymphoedema is a chronic incurable condition. Prior to October 2013, bandaging for children with Lymphoedema was not carried out in the Trust area. This condition can result in numerous problems, including the inability to obtain appropriate footwear, issues with nail care and repeated infections in the affected limbs. After consultation with Lymphoedema specialists around the world, the Trust introduced compression bandaging for paediatric patients with the condition. The first child completed treatment in October 2013 and had a marked reduction in their oedema. The child was subsequently fitted with compression garments which are worn daily. This service will now be available to other children who require it.

Respect and Protect – Western Local Adult Safeguarding Partnership

The Western Local Adult Safeguarding Partnership (LASP) held an awareness week in March 2014 that focussed on raising awareness of the abusive situations faced by older people, people with mental health issues, learning disability, physical disabilities and those with addictions.

Financial and Service Pressures

The Directorate has faced a challenging year with current financial pressures and contingency measures. This is coupled with the increasing +65 years population as indicated in demographic trends and the associated escalating demand for services, particularly for those patients and clients with complex needs. All these issues have resulted in increased lengths of stay in hospital; delays in providing domiciliary care and nursing/residential home packages; expanding waiting lists in place for services and the impact on performance management targets.

The PHA and RHSCB conducted a regional demand/capacity exercise for all Allied Health Professions. It is anticipated that the findings of this exercise will be shared with Trusts in the near future, following which there will be discussion to agree a way forward to improve waiting times for access to AHP services.
Professional Nursing

Staff Awards

Royal College of Nursing – Nurse of the Year Awards

Western Trust nurses were represented in four of the nine categories at the annual RCN Nurse of the Year Awards held in Belfast during June 2013. Alice McQuaide, Staff nurse, was awarded the Public Health Award. The Family Nurse Partnership initiative was the first one in Northern Ireland.

Jacqueline Magee, Case Manager for people with long term conditions, was a finalist in the Transforming Care with Technology Award. The focus of Jacqueline’s nomination was on her role in promoting tele-monitoring as a means of monitoring the condition of patients with Long Term Conditions within their own homes.

Deirdre Harkin and Vicky McCrory, staff nurses within Trauma and Orthopaedics in Altnagelvin Hospital, were awarded the Chief Nursing Officer’s Award for improving patient safety for patients with dementia through their introduction of the ‘purple folder’, which was designed to highlight to other health and social care staff that particular patients had a diagnosis of dementia.

Project Updates/Service Developments

Beyond the Grapevine

‘Beyond the Grapevine’ - the network that enables frontline nursing and midwifery staff to engage directly with the Executive Director of Nursing, has continued to operate throughout the year and provides staff with the opportunity to discuss about how services are being delivered and developed, with a guarantee that if issues cannot be resolved during meetings, they will be followed up and feedback provided.

Delivering Care

A Framework for Nursing and Midwifery Workforce Planning to Support Person Centred Care in Northern Ireland.

‘Delivering Care – A Framework for Nursing and Midwifery Workforce Planning to Support Person Centred Care in Northern Ireland’, was approved by the Health Minister, Edwin Poots in February 2014. Phase one of the framework, which focussed on acute medical and surgical wards, has been completed and work is progressing with commissioners to agree how the implementation of the framework will be funded. Work has also commenced on Phase two, Emergency Care; Phase three Community Nursing and Phase four Health Visiting. Other phases are planned for the future.

Nurse Staffing at South West Acute Hospital

A comprehensive evaluation of the nurse staffing levels undertaken during the first six months following the opening of the South West Acute Hospital highlighted the need for additional investment in registered nurses. Additional investment was received in November 2013.

Electronic Rostering

Implementation of the E-Rostering system has continued during 2013/14 with approximately 2,500 nursing staff now using the system. Work was also taken forward to demonstrate how the system can inform ward sisters, charge nurses and their managers on the effectiveness and efficiency of deployment of available staff.

Family Nurse Partnership Programme Evaluation

An evaluation of the Family Nurse Partnership Programme was commissioned by the PHA to examine how the Trust implemented the programme. The aim was to inform service development of the FNP programme in the Western Trust area and plan the future roll-out of the programme in Northern Ireland.

Preceptorship Framework for Nursing

The Chief Nursing Officer commissioned the development and implementation of a ‘Preceptorship Framework’ to support the transition of newly registered nurses into practice. The framework is designed to enable staff to consolidate their knowledge and skills in the delivery of safe and effective care.

The Trust’s Practice Education Team led on the implementation of the framework within the Acute Directorate during 2013. Preceptees are supported to complete a portfolio to evidence the development of their skills and knowledge with a focus on professional accountability and responsibility. A register will provide evidence to the Chief Nursing Officer of new registrants who have successfully completed the programme.

Patient and Client Experience

The Trust has had an active programme of work designed to improve the understanding of the patient and client experience of care during 2013/14. Feedback from patients is used to improve aspects of the care environment and practice. Examples of improvements identified to date include the need to improve waiting areas, signposting in the South Wing of Altnagelvin Hospital and the pain management of patients with dementia in the Emergency Department.

The ‘10,000 Patient Stories’ project commenced in 2013, with the first phase surveying the experience of patients and families who had attended Emergency Departments and the Out of Hours service. Approximately 240 experiences have been recorded in relation to this, with further work planned.

A second phase involves collecting stories from patients and families about their experiences of nursing and is designed to explore the public’s confidence in the quality of care provided by nurses. To date, 260 stories have been gathered across surgical, medical and older peoples’ wards.
First Phase implementation of Fluenz programme within School Nursing Service

The joint committee on vaccination and immunisation recommended that the routine annual Flu Vaccination Programme be extended to all children aged Two to 16 years of age and phased in over a number of years. The vaccination programme officially began on 1 October 2013 with primary six children being the initial target group.

The pilot campaign went extremely well and overall school nursing achieved an uptake of 80% in Primary six children in Northern Ireland. Northern Ireland achieved a significantly higher uptake than other parts of the U.K. This could not have been achieved without the very significant help and cooperation from child health system colleagues and schools. This highlights the excellent collaborative working relationships between the School Nursing Service and education establishments.

The second phase of the programme will start in Autumn 2014, when the vaccine will be offered to all primary school children from Primary one to Primary seven inclusive.

It’s All About Me (Sibs) Programme

Thirty-eight children aged between six and 17 years of age, have completed a nine week personal development programme designed for brothers and sisters of children with learning disabilities.

The Programme ‘It’s All about Me Sibs’ was delivered in Omagh, Fermanagh and Londonderry by community interest company, ‘Me Unlimited’ and funded by the Western Trust.

During the programmes, siblings engaged in a whole range of structured and fun workshops around the themes of developing confidence, improving coping mechanisms, building communication skills, reducing stress and developing a positive attitude. The overall aim is to ensure the children learnt new self-management skills and availed of invaluable time out from their caring responsibilities.

The programme included a Sibs ‘Feel the Rage’ exhilarating sib team building event at Todd’s Leap and a celebration event at the end of the programme, at which participants received their recognition awards and certificates of outstanding achievement.

Maternity, Gynaecology and FNP Services

The Western Trust’s Maternity Services has been identified as one of the top three of 148 healthcare providers in England, Wales and Northern Ireland by CHKS for ‘Excellence in Maternity Care’ as part of their Top Hospitals Programme Awards. CHKS is a provider of healthcare intelligence and quality improvement services to the NHS and independent healthcare sector.

The CHKS Top Hospital Awards celebrate the success of healthcare providers across the UK and internationally, recognising acute organisations that have excelled in areas of patient safety, data quality, quality of care and new for 2014, excellence in maternity care.

Paediatric and Neonatal Services

A short stay paediatric assessment unit, based in Ward 16, was piloted in Altnagelvin Hospital from April to June 2013 to facilitate rapid and quality patient assessment. The pilot resulted in a 20% reduction in paediatric medical admissions to the Children’s Ward. Although the service has not been mainstreamed in its entirety, admissions do continue to be triaged and treated more efficiently than was possible on the main inpatient ward. The team of medical and nursing staff responsible for this pilot was runner up in the Improving Patient and Client Services at the annual Trust Staff Recognition Awards in November 2013.

Autism Services

The ‘Autism Buddy’ Programme, a joint initiative developed between the Western Education and Library Board and the Western Trust, was delivered in Omagh and Fermanagh. The aim of this programme was to deliver a four weeks arts, crafts and youth club programme for young people with autism to ensure they feel comfortable within the youth club setting and have fun. Feedback from parents was very positive, they noticed their children becoming more assertive and felt this was a great opportunity for them to socialise with their peers in a safe environment.

Social Services Training

Over the past year the Social Services Training and Development Team (SSTDT) have delivered 251 training events for 3,100 staff across all service areas. Over 20% of these staff come from a non-social work/social care background, thus reflecting the increasing multi-disciplinary nature of training and service delivery. There is increased demand for safeguarding training for staff working with children and adults and this year over 840 staff benefited from this training. Our understanding of the complexities of safeguarding is constantly evolving and developing and this year we hosted a regional conference on child sexual exploitation which was attended by a total of 202 people from a range of agencies and professions.
Finance and Contracting Directorate

The key functions of this Directorate include: financial services, including statutory accounting and reporting; payroll; accounts payable/receivable; financial management; capital planning and investment; costing; value for money/efficiency support and dedicated financial expertise; and contracting with the voluntary, community and private sector for health and social care services. Some of these functions are now delivered by the Business Services Organisation’s shared services centres on the Trust’s behalf.

During 2013/14, the Directorate transferred its payment services, income, travel and payroll functions to the Business Services Organisation’s new shared services centres. The income service moved in November 2013, payment services moved in January 2014, the travel function in February 2014 and the payroll function in March 2014.

The Finance Directorate supported the Trust in managing its £335 million revenue and £38 million capital budgets in 2013/14. The Directorate has prepared the statutory accounts which confirm the Western Trust’s financial position for 2013/14 (also summarised within this report).

One of the key performance indicators of the Trust is prompt payment performance. The Payments Section of the Directorate processed 90.1% of the value of invoices within 30 days/other payment terms and 79.6% within 10 days. The Western Trust has consistently performed strongly against this target.

In September 13, the Western Trust implemented a new computer system for paying staff payroll, travel and subsistence expenses. This new system facilitates manager and employee self-service whereby information can be entered and approved electronically thereby reducing the need for physical transportation of paper-based forms.

The Trust has an extensive capital programme and the Capital, Costing and Efficiency Division has supported the Trust in the preparation and monitoring of major business cases relating to both the Radiotherapy Unit and Phase 5.1 of North Wing at Altnagelvin as well as progressing with the Enhanced Local Hospital in Omagh.

The Contracting Department supported the service directorates in managing their contracts with the voluntary, community and private sector for health and social care services in 2013/14. The contracts are for a wide range of services including Domiciliary Care, Residential/Nursing Home care and Family Support Services.

Human Resources Directorate

Business Services Transformation Programme (BSTP)

HRPTS

The Western Trust was the first Trust in Northern Ireland to implement the new Human Resources, Payroll, Travel and Subsistence system (HRPTS). HRPTS is a modern business system designed to streamline processes that reduces the need for paper and improve traceability of tasks.

The system was successfully implemented to staff in the Human Resources Directorate and in the Payroll and Travel sections of the Finance Directorate on 2 September 2013. Since then all Trust staff have been paid using HRPTS.

To date the system is being used by over a third of Trust staff to carry-out routine tasks via employee and manager self-service functionality.

Staff Recognition Awards

The fifth annual Trust Staff Recognition Awards were held on 27 November 2013 in the Silverbirches Hotel, Omagh and was attended by the Minister for Health, Edwin Poots.

This year the Chairman’s award went to the Fire Incident Response Team, Altnagelvin Hospital for their efforts in responding to the major incident in November 2012 and the following clean-up operation.

Many Individuals and teams were celebrated for being innovative, for setting an example to others, for their commitment and the part they play in delivering excellent services.

Excellence in Coaching Awards

The Trust is a member of CAWT, the cross border health and social care partnership, comprising the Health Service Executive (HSE) in the Republic of Ireland, the Southern and Western Trusts, Health and Social Care Board and Public Health Agency in Northern Ireland.

In 2011 Western Trust staff became members of the CAWT Coaching and Mentoring Project Board which was successful in securing EU INTERREG IVA funding to design, develop and implement an accredited Professional Coach Training Programme for managers and clinicians employed in health and social care organisations. The overarching purpose of the programme was to strengthen leadership and management capacity within and between the CAWT partner organisations.

Nineteen Western Trust staff participated in the training programme and together with fifty-three staff from the other CAWT partner organisations form the “Connect” Coaching Network. The coaches now offer coaching to staff across the CAWT area.

‘Connect’ is an innovative, sustainable coaching resource for staff in the CAWT organisations, which supports them to work through real day-to-day issues in order to identify their own solutions. This collaborative network received the prestigious “Excellence in Coaching Award” from the Irish Institute of Training and Development in March 2014.
The Medical Directorate promotes the provision of excellent services to the public and contributes to high quality research, training and education, ensuring the Trust recruits and retains staff of the highest calibre.

Supporting excellence in professional practice and standards amongst the approximately 470 medical and dental staff is achieved through a team of committed professional staff supporting programmes for medical appraisal, patient and client safety and quality improvement within the organisation.

► Infection Prevention and Control
The Trust achieved target reductions in healthcare acquired infections with C. difficile. The reduction strategy centred on the application of evidence based care bundles and strict accountability systems. The reinstatement of the Chief Executive’s Accountability Forum helped reinforce the existing arrangements.

The Trust has regularly achieved 100% compliance in self-reported hand hygiene monitoring in clinical areas throughout Trust facilities.

► Medical and Dental Education and Training
Medical Education, through the continued efforts of its consultant team, ensures that the Trust’s reputation as a major teaching centre continues to grow, attracting high quality junior/senior medical and other staff.

Through Medical Education and formalised arrangements with Queens University, Belfast (QUB), for the provision of undergraduate medical education, and Northern Ireland Medical and Dental Training Agency the Trust continues to deliver and develop education for the doctors-in-training. The Trust provides clinical attachments to a cohort of 250 third, fourth and fifth year QUB medical students and approximately 210 doctors in training. It also provides elective placement to non-QUB medical students from around the world.

► Research and Development
Establishment of the NI Centre for Stratified (Personalised Medicine) at the Clinical Translational Research and Innovation Centre (C-TRIC) in October 2013 represents a major step in the evolution of C-TRIC and the Western Trust. From Autumn 2014 it will also host taught undergraduate [BSc] and postgraduate [MSc] courses in Translational Medicine. The Centre for Stratified Medicine should act as a magnet for internal investment, collaborative links with industry and contribute to the animation of the local Life Sciences sector through the generation of Intellectual Property and the establishment of spinout companies. To facilitate the Centre for Stratified Medicine the need to extend the current C-TRIC building was identified. A business case for this extension has been approved and the contract awarded for completion at the end of the Summer in 2014.

The Regional Health and Social Care Applications Gateway, established on 1 May 2013 and hosted by the Western Trust, is based in C-TRIC. The Research Gateway is a national co-ordinating centre to receipt and streamline multi-centre research applications on behalf of researchers in the UK, and works in close collaboration with other HSC Trust Research Offices, and national coordinating centres.

► Quality and Safety
The first Western Trust Annual Quality Report was approved in January 2014. This report contains quality and safety indicators which have been agreed regionally and which present a wide-ranging profile of care aspects which are important to both our patients/clients and our staff. It demonstrates the many achievements of our staff working across all specialty teams and services. During 2013/14 the Quality and Safety Department focused on:

- Morbidity and Mortality reviews which has involved developing, promoting and ensuring consistent processes to result in opportunities for learning and improving patient safety and quality of care.
- The development and provision of Root Cause Analysis (RCA) training. This is used to ensure there is a full investigation where incidents occur with learning identified as well as associated action plans, so that where necessary we can change practice and procedures to improve outcomes for our patients;
- A new system to monitor the completion of health and safety risk assessments. This provides the Trust with an improved level of assurance regarding the management of health and safety within its facilities. The Western Trust provided oral presentations and poster displays at the All-Ireland Delivering Safer Care Conference held in Belfast on 12 and 13 March 2014. The Conference showcased quality improvement and safety initiatives in health and social care.

► Appraisal and Revalidation
The Medical Directorate has developed systems to support doctors through both the appraisal and revalidation processes. These systems ensure that all doctors are aware of the readiness requirements and timescales to facilitate an appropriate recommendation by the Responsible Officer. Fifty-nine doctors have already been through the revalidation process.

The Trust Electronic Appraisal System has been updated to take account of the new regional forms and went live in January 2014. The system now has additional features including an evidence library, revalidation readiness information and enhanced automatic letters and reporting. The Western Trust is currently the only Trust in Northern Ireland with an online appraisal system.
Emergency Preparedness and Business Continuity

A number of events took place throughout the year which presented specific challenges for the Western Trust and detailed planning ensured there was minimal impact on service delivery. These included the Derry – Londonderry City of Culture and associated events drawing hundreds of thousands of people to the city, the Global G8 summit, held in Enniskillen in June 2013.

The Trust provided support to HSE colleagues following a serious flooding incident in Letterkenny Hospital in July 2013. During the response and clean-up operation, Republic of Ireland nurses worked at Altnagelvin Hospital. This was the first occasion that the cross border movement of nursing staff occurred. This provided the unique opportunity to develop good working relationships with our HSE counterparts.

Estates Services

Based on a rolling annual risk assessment programme, Estates Services identified the following three key priority work areas for improving compliance in 2013/14:

Asbestos

The Trust has in place a detailed Asbestos Register, from which a Management Plan has been developed which adopts a risk based approach to address this issue. A number of areas have been addressed during 2013/14 at a cost of £150,000 to eliminate the risk of exposure to asbestos containing materials.

Water Safety

£700,000 was invested in 2013/14 in upgrading water system infrastructure in both acute and community patient and client areas. In Altnagelvin Hospital, the mains water distribution network was upgraded to improve its resilience and efficiency and also significantly reduce risks associated with water borne pathogens.

Fire Safety

£1 million was spent on improving fire safety in Altnagelvin Hospital. This included two significant projects focusing on fire improvements works and the installation of fire evacuation lifts. These improvements directly addressed recommendations and learning from the fire at Altnagelvin in the previous year. Estates Services have also invested in software compliance tools to assist in the development of improved management and procedural arrangements to mitigate these risks.

Catering Management & Administration System (SAFFRON) goes Live

A new Catering Management and Administration system (SAFFRON) was implemented Trust wide in 2013/14. In conjunction with the Catering Liaison Dietician, Support Services have reviewed patient menus, standardised recipes and developed a new two week menu cycle Trustwide. Currently Altnagelvin, Gransha and the South West Acute Hospitals are operating the new two week menu cycle.

This innovation has enabled the Trust to develop a catering provision that meets regional and national standards and is flexible enough to meet the array of nutritional requirement of patients. In addition to this, ordering patient meals electronically via a handheld tablet is being implemented and is complete in Altnagelvin. This will now be rolled out within the South West Acute Hospital before taking forward to Gransha and Omagh.

Information Communications Technology

During the year the ICT Department have supported the introduction of a range of technologies and systems which aim to improve the patient experience, quality of care and modernise services. These include Electronic Healthcare Record; Outpatient Self Check-in System; Electronic Whiteboard Project across 22 wards across the hospital; Clinical Access and Room Entertainment System (CARES); Human Resources Payroll Travel and Subsistence and Electronic Document Management.

All voice, data and mobile technology was also reviewed across the Trust resulting in a significant financial saving whilst simplifying the communications network throughout the Trust.

Transforming Your Care Team

The Transforming Your Care team (TYC) has worked intensively during 2013/14 to facilitate the development and completion of bids and the launch of projects in line with the TYC core principles. Successful projects which commenced within the Trust this year include:

- An Ambulatory pathway for patients admitted for unscheduled hospital care;
- Reduced expenditure on Pharmaceuticals;
- Integrated Medicines Management;
- Best practice prototype models for interface pharmacy;
- OPAL (Assessment model for Hospital Care for Older People);
- Reform of Acute Mental Health Services;
- Development of a new DVT Pathway in Partnership with GPs;
- Supported Living in a Community Setting for Adults with a Learning Disability;
- Special Multidisciplinary Care Pathway for Diabetic Inpatients with Foot Problems.

In addition, the Trust has been a key stakeholder in the work to implement TYC through Integrated Care Partnerships (ICP) and Trust staff have worked with the Health and Social Care Board and GPs to establish care pathways closer to home. To date £648,000 has been invested in four new ICP pathways in the West, including: Diabetes; Frail Elderly; Respiratory and End of Life Care.

Health Improvement

Western Trust Goes Smokefree

The Trust became the first health Trust in Northern Ireland to introduce a smokefree policy. All Western Trust sites became completely smoke-free on 12 March 2014, with smoking not permitted anywhere on Trust grounds or facilities. This will ensure a healthier and more pleasant environment for all and promote better health outcomes for our service users.

Staying Safe Online in the West

The Western Trust was recently commended in a report produced by the Safeguarding Board for Northern Ireland (SBNI) for work that is ongoing in terms of raising awareness of how to stay safe online. Following two highly successful conferences, a range of e-safety resources for children, parents and practitioners have been developed.

CSS Gulp or Sip Programme

As part of an initiative to address the binge drinking culture across Europe, the Community Support Service ran a successful Alcohol Awareness Programme “Gulp or Sip? Alcohol Culture in 21st Century Europe” which was attended by delegates from across Europe.

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Altnagelvin Hospital Redevelopment

The strategic redevelopment programme for Altnagelvin continued to progress in 2013/14 with the Trust securing approval for the planned new ‘North Wing’ of the Hospital. The North Wing will deliver six new inpatient ward areas for the Hospital to enable transfer of services from the existing Tower Block. The project also will provide a new main entrance for the Hospital and a multi-storey car park.

The Directorate is currently focusing on site clearance works to enable commencement of the new North Wing ward block as soon as possible. The Trust awarded an enabling works contract in January 2014 to relocate education and clinical office areas, provide interim car parking and refurbish clinical areas. These essential works will ensure services can be safely transferred to allow access to the proposed site for the North Wing.

Design work is also ongoing for the provision of a multi-storey car park at Altnagelvin. Again, this is an essential requirement to replace car parking spaces that will be lost to provide a site for the new North Wing building. The aim is to construct this car park during the 2014/15 financial year, enabling the North Wing ward blocks to commence construction in 2015.

This year also saw the completion of a new dedicated endoscopy unit at Altnagelvin. The new facility was fully operational at the end of July 2013, providing a fully integrated endoscopy service with co-located decontamination unit.

Radiotherapy Unit

Intensive planning continues in line with Ministerial commitments in relation to the cross border Radiotherapy Unit at Altnagelvin.

A number of work streams have been progressed over the past twelve months in relation to service planning, cross-border services, workforce planning, design development and other key aspects.

The process of tendering for the main Radiotherapy Contract Award is currently underway. Tenders will be evaluated prior to any recommendation to Trust Board with respect to award, which is anticipated to take place in early 2014/15 financial year.

In parallel and in line with earlier approvals, a Full Business Case was developed and submitted for DHSSPS approval in early March 2014, prior to contract award.

In August 2013 and as part of the enabling works schemes, the Trust Board approved the award of contract for the relocation and refurbishment of the modular office building. The work was completed in February 2014 when the building was handed over as the new Centre for Medical and Dental Education and Training. All other enabling works to clear the site are, or will shortly be, completed.

The advance recruitment of the Head of Therapeutic Radiography was successfully completed and the new postholder took up post in November 2013. Plans for the advance recruitment of posts in medicine, medical physics and therapeutic radiography are currently being taken forward.

Omagh Enhanced Local Hospital

Progress continued to be made in 2013/14 towards delivery of the Omagh Enhanced Local Hospital. The tender process is now underway and an award of contract anticipated in early/mid 2014, following detailed evaluation of the tenders and a recommendation to award.

Enabling works contracts to prepare the site for the new Hospital complex were concluded during the year and included the upgrade to the site water and sewage infrastructure and completion of the new Link Road adjacent to the site. This road opened in December 2013. These current enabling schemes have contributed to expenditure totalling £15m to date for enabling works.

In parallel, the Omagh Project team are progressing with the review of equipment requirements for the new hospital and identification of potential early procurement and transfers. This work has also included the review of ICT interface requirements for all departments.

The Trust has recently submitted a Business Case to the Department of Health Social Services and Public Safety (DHSSPS) for a proposed Mental Health Extended Recovery and Rehabilitation facility and is awaiting Departmental approval to proceed.

South West Acute Hospital

The South West Acute Hospital is now approaching its second year in service since opening to patients and clients in June 2012. Patients and staff are continuing to enjoy the benefits offered by a modern new acute hospital developed on a green field site. A post project evaluation is currently being finalised for submission to the DHSPSS. This evaluation includes the results of both a patient satisfaction survey and a staff survey.

De-Commissioning of the Erne Hospital

Plans are well advanced to prepare the site of the former Erne Hospital for demolition and disposal. Site surveys are now complete and a contractor has been appointed to erect a temporary facility for the Northern Ireland Ambulance Service in advance of the construction of a new Ambulance base for Enniskillen. This project is targeted for completion in the Autumn 2014.
1. Fees and allowances payable to the Chairman and other Non-Executive Directors are as prescribed by the Department of Health, Social Services and Public Safety.

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

   - Mr Gerard Guckian, Chairman
   - Mrs Joan Doherty, Non Executive Director
   - Mrs Sally O’Kane, Non Executive Director
   - Mrs Stella Cummings, Non Executive Director
   - Mrs G Hillick
   - Mr N Birthistle
   - Mr B McCarthy
   - Mrs S O’Kane
   - Mrs S Cummings
   - Mrs J Doherty
   - Mr G Guckian
   - Mrs N Sheerin
   - Ms Teresa Molloy
   - Mr A Corry Finn
   - Mr Kieran Downey
   - Mrs L Mitchell
   - Mrs S Groogan
   - Mr A Moore
   - Dr A Kilgallen
   - Mr Alan McKinney
   - Mr A Moore
   - Mr C Mulgrew
   - Mr D Aldron
   - Mr M Maloney

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. Circular HSC (SE) 1/2013 outlined the pay arrangements for Senior Executives in 2012/13. No uplift for Senior Executives for the 2013/14 financial year has been notified to Trusts at this time. 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 entitlements and terms and conditions requirements.

6. The Remuneration Committee meets to assess the performance of Senior Executives. Its recommendations on performance awards are made to a meeting of Trust Board for approval. Senior Executives absent themselves for this item on the Trust Board agenda.

Elaine Way
Chief Executive
12 June 2014

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**Senior Executives Remuneration (Audited)**

The Senior Executives’ remuneration (excluding employer’s contribution to National Insurance) for the year were as set out below.

<table>
<thead>
<tr>
<th>NAME</th>
<th>TITLE</th>
<th>Salary</th>
<th>Bonus/ Performance Pay</th>
<th>Benefits In Kind (rounded to nearest £100)</th>
<th>Real Increase in CETV</th>
<th>Total annual pension at age 60 and related lump sum at age 60</th>
<th>CETF at 31st March 2013</th>
<th>CETF at 31st March 2014</th>
<th>Real Increase in CETV</th>
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<td>Mrs Sally O’Kane</td>
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<td>Mr Gerard Guckian, Chairman</td>
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<td>Mrs Joan Doherty, Non Executive Director</td>
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**OTHER BOARD MEMBERS**

- Mrs Sally O’Kane
- Mrs Stella Cummings
- Mr Gerard Guckian
- Mrs Joan Doherty
- Mrs G Hillick
- Mr N Birthistle
- Mr B McCarthy
- Mrs S O’Kane
- Mrs S Cummings
- Mrs J Doherty
- Mr G Guckian
- Mrs N Sheerin
- Ms Teresa Molloy
- Mr A Corry Finn
- Mr Kieran Downey
- Mrs L Mitchell
- Mrs S Groogan
- Mr A Moore
- Dr A Kilgallen
- Mr Alan McKinney

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**EXECUTIVE MEMBERS**

- Mrs EWay, Chief Executive
- Mrs L Mitchell, Director of Finance and Contracting
- Mr Kieran Downey, Director of Children’s Services
- Mr ACorry Fint, Director of Primary Care and Older People’s Services

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**NON-EXECUTIVE DIRECTORS**

- Mr G Guckian, Chairman
- Mrs L Mitchell
- Mrs C McNamee
- Mr A Moore
- Mr D Aldron
- Mr M Maloney

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- Mr A Corry Finn
- Mr Kieran Downey
- Mrs L Mitchell
- Mrs S Groogan
- Mr A Moore
NOTE 1 - This post was re-evaluated effective from 9 July 2009 and arrears were paid accordingly. These arrears are included in the 2012/13 salary figure. As Non-Executive members do not receive pensionable remuneration, there will be no entries in respect of pensions for Non-Executive members.

A Cash Equivalent Transfer Value (CETV) is the actuarially assessed capital value of the pension scheme benefits accrued by a member at a particular point in time. The benefits valued are the member’s accrued benefits and any contingent spouse’s pension payable from the scheme. A CETV is a payment made by a pension scheme, or arrangement to secure pension benefits in another pension scheme or arrangement when the member leaves a scheme and chooses to transfer the benefits accrued in 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 and the other pension details, include the value of any pension benefits in another scheme or arrangement which the individual has transferred to the HSC 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 prescribed by the Institute and Faculty of Actuaries.

Real Increase in CETV – This reflects the increase in CETV effectively funded by the employer. It takes account of the increase in accrued pension due to inflation, contributions paid by the employee (Including the value of any benefits transferred from another pension scheme or arrangement) and uses common market valuation factors for the start and end of the period. All amounts are audited by the Trust’s external auditors. Benefits in Kind are due to Senior Executives availing of the Trust's leased car scheme.

**Finance Report**

**Financial Targets**
The Trust experienced a number of financial cost pressures during 2013/14 which resulted in a reported deficit of £2.122m for the year. The key cost pressures were:

- Increase in domiciliary care costs – primarily driven by growth in demand arising from on-going demographic changes
- Increased use of medical locums and agency nursing staff – in order to ensure on-going, safe and effective services, shortages in the availability of suitably qualified personnel have required more expensive solutions arising not least from the difficulty of recruitment and retention in the Trust
- Increased childcare costs – driven by growth in complexity and demand especially in relation to foster care placements and specialist childcare placements.

Despite significant efforts by management and staff to deliver further contingency measures and non-recurring support from HSC Board, the Trust was unable to contain its expenditure within its income levels for the year.

The Trust therefore did not meet its statutory duty to break even. The Trust was able to contain its capital spending within the Capital Resource Limit approved by the DHSSPS for the year.

**Spending on Capital Assets**
£38.3 million was spent in 2013/14 on capital schemes, vehicles and equipment. The Trust spent £21.7 million on Buildings and Dwellings additions and Assets under Construction. In addition £1.5 million was spent on transport equipment and £15.1 million 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 2012/13 were:

<table>
<thead>
<tr>
<th>Trust Management Costs</th>
<th>£'000</th>
<th>% of Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>18,275</td>
<td>3.2%</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 HSC 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>Number</th>
<th>2014</th>
<th>2014 Value £'000s</th>
<th>2013</th>
<th>2013 Value £'000s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total bills paid</td>
<td>113,413</td>
<td>170,225</td>
<td>119,570</td>
<td>261,384</td>
</tr>
<tr>
<td>Total bills paid within 30 day's of receipt of an undisputed invoice</td>
<td>104,230</td>
<td>163,759</td>
<td>108,549</td>
<td>392,548</td>
</tr>
<tr>
<td>% of bills paid within 30 days</td>
<td>91.9%</td>
<td>91.9%</td>
<td>90.8%</td>
<td>96.1%</td>
</tr>
<tr>
<td>Total bills paid within 30 days of receipt of an undisputed invoice</td>
<td>90,531</td>
<td>160,557</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of bills paid within 30 days of receipt of an undisputed invoice</td>
<td>90.1%</td>
<td>90.1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total bills paid within 10 day's target</td>
<td>71,702</td>
<td>141,947</td>
<td>76,188</td>
<td>331,501</td>
</tr>
<tr>
<td>% of bills paid within 10 day's target</td>
<td>69.4%</td>
<td>79.6%</td>
<td>63.7%</td>
<td>81.2%</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 number of directors and managers of the Trust who have disclosed interests to parties connected with the Trust. 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 and are not within the scope of the audit of the Accounts of the Western Health and Social Care Trust. For further information the full Accounts and Auditor’s Report for the year ended 31 March 2014 should be consulted. Please note that the full accounts also include a Governance Statement 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 and Contracting,**
Western Health and Social Care Trust,
MDEC Building, Altnagelvin Hospital Site,
Glenshane Road, LONDONDERRY BT47 6SB
Trust Annual Accounts 2013/14

Statement of Comprehensive Net Expenditure for the year ended 31 March 2014

<table>
<thead>
<tr>
<th>2013/14 £000</th>
<th>2012/13 £000</th>
</tr>
</thead>
<tbody>
<tr>
<td>(568,184)</td>
<td>(604,971)</td>
</tr>
<tr>
<td>(568,184) Expenditure</td>
<td>(604,971) Expenditure</td>
</tr>
<tr>
<td>20,639</td>
<td>20,217</td>
</tr>
<tr>
<td>10,215</td>
<td>10,204</td>
</tr>
<tr>
<td>30,854</td>
<td>30,421</td>
</tr>
<tr>
<td>(537,330)</td>
<td>(574,550)</td>
</tr>
<tr>
<td>(537,330) Net Expenditure</td>
<td>(574,550) Net Expenditure</td>
</tr>
<tr>
<td>535,208</td>
<td>574,634</td>
</tr>
<tr>
<td>(2,122) (Deficit) / Surplus against RRL</td>
<td>64</td>
</tr>
</tbody>
</table>

Statement of Financial Position as at 31 March 2014

<table>
<thead>
<tr>
<th>2013/14 £000</th>
<th>2012/13 £000</th>
</tr>
</thead>
<tbody>
<tr>
<td>578,708</td>
<td>532,213</td>
</tr>
<tr>
<td>4,696</td>
<td>4,465</td>
</tr>
<tr>
<td>16,198</td>
<td>14,499</td>
</tr>
<tr>
<td>3,320</td>
<td>590</td>
</tr>
<tr>
<td>24,204</td>
<td>19,544</td>
</tr>
<tr>
<td>(96,773)</td>
<td>(102,516)</td>
</tr>
<tr>
<td>505,139</td>
<td>449,441</td>
</tr>
<tr>
<td>(121,520)</td>
<td>(123,813)</td>
</tr>
<tr>
<td>(8,193)</td>
<td>(8,193)</td>
</tr>
<tr>
<td>376,426</td>
<td>312,878</td>
</tr>
<tr>
<td>67,900</td>
<td>32,167</td>
</tr>
<tr>
<td>308,436</td>
<td>280,711</td>
</tr>
<tr>
<td>376,426</td>
<td>312,878</td>
</tr>
</tbody>
</table>

Statement of Cash Flows for the Year Ended 31 March 2014

<table>
<thead>
<tr>
<th>2013/14 £000</th>
<th>2012/13 £000</th>
</tr>
</thead>
<tbody>
<tr>
<td>(527,752)</td>
<td>(495,333)</td>
</tr>
<tr>
<td>(34,730)</td>
<td>(34,647)</td>
</tr>
<tr>
<td>83</td>
<td>(145,039)</td>
</tr>
<tr>
<td>50</td>
<td>(145,989)</td>
</tr>
<tr>
<td>(36,464)</td>
<td>(183)</td>
</tr>
<tr>
<td>565,000</td>
<td>641,505</td>
</tr>
</tbody>
</table>

Elaine Way
Chief Executive

Gerard Guckian
Chairman

Elaine Way
Chief Executive

Gerard Guckian
Chairman

Western Health and Social Care Trust

www.westerntrust.hscni.net

Western HSC Trust