Welcome

Welcome to our short review of the past year, giving you an overview of what's been happening in your local hospitals.

Overall, 2017/18 has been a positive year for Ashford and St Peter's Hospitals, despite a continually challenging environment.

As always, we have strived to deliver the highest standard of care for our patients, enabled by the hard work and commitment of colleagues across our hospitals.

Our year-end position was particularly successful where we recorded an outstanding surplus of £18.9 million. You can read more about our detailed financial performance on p.17.

Once again we were nominated as a top performing hospital by CHKS and were also shortlisted at the national HSJ Awards for staff engagement - a great reflection of the open culture we are developing and the importance we place on ensuring our hospitals are great places to work.

We continue to undertake a range of improvements to enhance the environment for patients and ensure they are treated in modern, high quality surroundings (see p.13) and have continued to make solid progress in developing clinical services, including new virtual clinics for urology, orthopaedics and gastroenterology (more details on p.5).

We were pleased to receive outline planning permission from Runnymede Borough Council for our joint proposal with Surrey and Borders Partnership NHS Foundation Trust to redevelop and sell a section of surplus land on the St Peter's site; this will enable us to redevelop and expand our urgent and emergency care services and improve onsite staff accommodation.

We have also spent considerable time developing a new five year strategy, setting a clear direction for the future through five new strategic objectives and a refreshed vision - to provide an outstanding experience and best outcomes for patients and the team.

Embedded in our new strategy is the importance of collaboration, which was particularly evident in the way local partners worked together over winter to manage unprecedented levels of demand. We continue to be a key partner within Surrey Heartlands and are working proactively on the development of a North West Surrey Partnership looking in particular at ‘out of hospital’ services.

We hope you enjoy reading this brief overview of our work and recent achievements; we’d also like to take this opportunity to thank all partners, volunteers and carers across the system who have supported us so well over the past year.

Andy Field
Chairman

Suzanne Rankin
Chief Executive
All hospitals Trusts are measured on how they perform against key targets – put in place to make sure patients are receiving the best possible care. The following table describes how we are doing against some key targets – most of which are set by NHS Improvement, the health sector regulator.

<table>
<thead>
<tr>
<th>Target</th>
<th>Target 2016/17</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of clostridium difficile cases</td>
<td>17</td>
<td>15</td>
</tr>
<tr>
<td>Number of MRSA blood stream infection cases</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>% of cancer patients waiting a maximum of 2 weeks from urgent GP referral to date first seen</td>
<td>93%</td>
<td>93.2%</td>
</tr>
<tr>
<td>% of cancer patients waiting a maximum of 31 days from diagnosis to first definitive treatment</td>
<td>96%</td>
<td>98.5%</td>
</tr>
<tr>
<td>% of cancer patients waiting a maximum of 2 months from urgent GP referral to treatment</td>
<td>85%</td>
<td>87.2%</td>
</tr>
<tr>
<td>% of patients waiting a maximum of 4 hours in A&amp;E from arrival to admission, transfer or discharge</td>
<td>95%</td>
<td>91.0%</td>
</tr>
</tbody>
</table>

Access to cancer treatment

We received over 13,500 urgent cancer referrals during the year, an overall 13% increase (46% over the last three years) and have worked with our commissioner colleagues at North West Surrey CCG to continue to deliver compliant performance. The Trust achieved annual compliance for all cancer standards for the year which compares extremely well against national average performance.

Infection control – hospital acquired infections

We are delighted that our clostridium difficile infection target for the year was below the national target; just five out of 15 cases were considered as due to lapses in care (i.e. avoidable infections). We were pleased to record no MRSA bacteraemia.

A&E four hour waiting target

Despite a continued focus on improving our emergency care pathway and much hard work put in by teams across our hospitals, we have struggled to meet the four hour waiting target this year, in a similar way to many Trusts, recording a total of 91.0% for the full year and 91.3%, 93.2% and 91.0% respectively for the first three quarters of the year.

A refreshed recovery programme including the national introduction of an Urgent Treatment Centre is now underway in partnership with our external urgent care partners and North West Surrey CCG to support improvement and delivery of NHS Improvement’s expectation to achieve national 95% compliance by March 2019.
Improving quality and developing the best clinical services

We continue with our strategy to develop our specialist acute services, with many exciting developments over the past year; whilst ensuring we provide high quality and safe care remains our absolute priority.

New Prostate Biopsy Procedure

Our urology team, pictured here in theatres, introduced a new prostate ‘template biopsy’ procedure to enable more thorough mapping, sampling and assessment of the prostate. This helps to detect and stage cancer more accurately, guiding the best form of treatment and is a positive development for our urology patients, who previously had to travel to another hospital to undergo this procedure.

Expansion of mental health services

In partnership with Surrey and Borders NHS Foundation Trust (SABP) we were recently awarded ‘Core 24’ funding to improve our liaison mental health services at St Peter’s Hospital and access to mental health training for staff.

The aim is to identify and help with emerging mental health problems before they reach a crisis point - perhaps supporting a patient after a traumatic accident or life changing diagnosis. This is an exciting development and great example of successful partnership working with our local healthcare partners.

Safe care of hip fracture patients

The care we provide to patients with fractured neck of femur (hip fracture) has been highly recognised. The National Hip Fracture Database – detailing outcomes for patients admitted to 177 hospitals in England with a hip fracture in 2016 - showed that we are now in the top 10% of hospitals in the country for the first time, for achieving best practice in treatment and care, low mortality rates post operation and shorter length of stay for our patients.

Our average length of stay for these patients has steadily fallen – from an average of 21.3 days in 2013 to just 15 days (against a national average of 21.6 days).
Red2Green – ‘Making every day count’

We recently launched a new philosophy of working, known as Red2Green - Making Every Day Count. It helps to turn patients’ ‘red days’, when no intervention of value takes place to progress them along their care pathway into value-adding ‘green days’, which tangibly assist the patient towards going home.

This helps patients to recover as quickly as possible and is positive as we know that spending long periods of time in hospital can lead to deconditioning and a loss of independence, particularly for older people. This is very much supported by our #endPJparalysis campaign – helping to get patients up, dressed and mobile whilst in hospital.

Endoscopy introduce Spyglass®

Last October our endoscopy team introduced a new and innovative endoscopic technique, known as Spyglass® ERCP, which enables a more definitive diagnosis of bile duct conditions.

Spyglass® uses miniature fibre-optic probe (attached to a camera head) to view the bile duct and take biopsies from areas which were previously inaccessible. In patients with large bile duct stones, shock waves can be delivered directly inside the bile tube to disrupt and break up the stones.

The technique is only available in a few centres in the UK and results from cases preformed so far have been positive.

Launch of virtual clinics

Two of our services – Integrated Musculoskeletal (iMSK) and Urology – have changed and improved the way they manage their clinic appointments over the past year.

The iMSK team, pictured here was the first to offer a virtual service, where patients with acute injuries are initially assessed in A&E and then contacted by the Virtual Fracture Clinic team within a couple of days. Often they can receive advice via telephone, email or post and avoid an unnecessary trip to hospital.

At the end of last year, Urology followed suit and launched their new virtual service. With a rapidly increasing number of patients, this has really helped the team to manage their service better and has proved popular with patients.
Delivering an excellent patient experience

Exciting developments in our maternity service

Over the last year a lot has been happening in our maternity service. The team are part of the Surrey Heartlands Better Births programme, which was launched last June – a five year forward view to develop new and innovative ways of delivering better maternity services to women and their families.

The Better Births team have done some excellent work to create shared midwifery services across the area and recently launched a new Pregnancy Advice Line for women under the care of Ashford and St Peter’s, Royal Surrey County and Epsom and St Helier Hospitals. It’s open 24 hours a day, seven days a week and provides direct access to midwives for women and healthcare professionals.

We have also launched a new electronic medical system, known as Badgernet. This replaces the traditional folder of paper notes held by pregnant women and means all records are safely stored electronically and available to both the woman and health professionals, via computer and mobile app. Badgernet interacts with our other IT systems so all important information – test results, CTG monitoring results etc – is stored in one, easily accessible, place.

The team have also done some great work to promote breastfeeding. They launched ‘Project Joey’ - a new initiative to give every mother the opportunity of uninterrupted skin-to-skin time with their baby as soon after birth as possible. This regulates the baby’s temperature, provides early immunity against infection, supports maternal and new born well-being and provides an environment that encourages the baby to feed.

In recognition of their hard work the Infant Feeding Team achieved re-accreditation at Level 3 in Unicef’s Baby Friendly Initiative – a worldwide programme established to promote breastfeeding and give the best practical advice and support to mothers for feeding their babies.
End PJ Paralysis

Our ward teams have been really behind the national #endPJparalysis campaign, which highlights the importance of getting patients up, dressed and moving. It’s evidenced that long periods of bed rest can lead to a state of being deconditioned and make recovery and returning home much harder. Being in pyjamas or a hospital gown reinforces the idea of being ‘sick’ and unable to move – whereas dressing in day clothes gives a sense of normality. Recently we saw colleagues across the Trust wearing their own pyjamas to work, to get the message across in an eye-catching and fun way.

Improving care for our senior patients

Over the last year the Care of the Elderly team worked on several co-design projects with their patients, staff, relatives, carers and stakeholders. As part of this work and following feedback from patients, they changed their name from ‘Care of the Elderly’ to ‘Senior Adult Medical Services’ (SAMS). They developed and introduced the ‘What Matters to you?’ concept – helping staff to identify the small things that matter most to patients during their time in hospital. The team are also part of a high-profile end-of-life care project called ‘Living Well to the Very End’, in partnership with The Point of Care Foundation. This began in May 2017 and has helped make some tangible improvements on Holly and Swift Wards in providing individualised and compassionate care at the end of a patient’s life.

Virtual Reality for patients with Dementia

Older patients with dementia can spend long periods of time in hospital and may feel unstimulated, which can have an impact on their memory impairment and lead to a greater risk of falling as they move around an unfamiliar ward. Being out of their usual daily routine can also lead to other distressing behavioural and emotional changes.

To improve their experience our medical teams purchased a virtual reality system developed especially for patients with dementia. The headset provides a three-dimensional, computer generated environment which the patient can interact with and offers a variety of ‘virtual worlds’ to explore. It has been shown to improve patients’ moods and create a long-lasting calming effect, sometimes hours after use.
Team ASPH: Developing a skilled and motivated workforce

Our ambition is to be recognised as a great place to work and be the local employer of choice by ensuring that colleagues are at the centre of decision-making and developing a culture which generates a sense of ownership. To ensure we have the highest levels of patient care, we need to support our staff and teams to be motivated, compassionate and resilient.

Developing our staff: Leadership and listening

Our Leadership and Talent Management Strategy, approved in 2016 continues to provide a range of interventions for leaders, managers and staff within the Trust for their development now, and for the future. Through the programmes we aim to build collective and compassionate leadership, promote engagement and contribute to creating the organisation culture that sustains quality improvement. This year we continued the good work from previous years and completed procurement for Leadership and Management apprenticeship qualifications.

Our executive walkabouts continue to be successful, allowing our senior leaders to engage with teams and staff on the front-line, ultimately supporting high standards of patient care and building relationships. We continue to use the Chief Executive’s Sounding Board and our managers’ Team Brief as vehicles to discuss challenges and initiatives with colleagues directly.

Wellbeing and resilience

In 2017 the Health and Well-Being Steering Group developed the new ‘Six Ways to Well-ness’ plan which focuses on the following areas:

As well as the Six Ways to Wellness our Schwartz Rounds continue to prove popular as an opportunity for members of the team to reflect, in a safe and supported environment, on difficult situations which have arisen by the nature of their day-to-day work. Sessions run every six weeks with more colleagues now being trained as facilitators.
Appreciation and recognition

The Trust’s staff recognition scheme continues to showcase the kindness and care that exists within our organisation. Nominations from patients, relatives and colleagues continued to be submitted via the WOW! Awards ready for our next Annual Awards which will now be happening in late 2018. These nominations continue to be a powerful way of acknowledging special effort and achievement.

Thank you to our volunteers

We are very proud and appreciative of everybody who volunteers at the Trust. This year numbers have risen to 453 people from 420 last year. Volunteers and student volunteers enhance the patient and family experience and support staff in over 50 different locations across both sites. They offer services such as guiding visitors, helping with patient mealtimes and listening support, fundraising, gardening and administration. This year we were pleased to recruit a team of volunteers who visit different wards to talk to and listen to patients with dementia. This helps patients to keep using their social skills while they are in hospital.

We would like to highlight the invaluable work of Radio Wey, Heartbeat Woking (providing support to cardiology patients) and of course the Friends of St. Peter’s Hospital and Ashford Hospital League of Friends.
Top Productivity

The Trust ended the year with a total surplus of £18.9 million*, with cost savings of £11.3 million; this benchmarks us as one of the top performing acute Trusts and gave us an NHS Improvement Finance and Use of Resources segmentation rating of 1 (the highest rating).

*This included:
- £1 million of operational surplus;
- £12 million national reward funding (for meeting and over-performing on our operating and financial plan and for winter pressures) which was higher than we were expecting;
- £5 million of local system funding.

Achieving our cost improvements

Over the year we have achieved £11.3 million of cost savings and net revenue generation, split across areas as follows:

- £3.0m
- £0.9m
- £0.7m
- £0.6m
- £1.6m
- £0.9m
- £0.7m
- £0.6m
- £3.0m
- £0.6m

Savings 2017/18 £m
- Clinical Efficiencies
- Repatriation/Increasing Market Share/ New Clinical Services
- Workforce Re-alignment and agency premium release
- Commercial and Other income
- Procurement
- Pharmacy and drugs
- Pathology
- Other Schemes
Our Quality Improvement Strategy

This was the third year of implementing our quality improvement (QI) strategy and we made significant progress. Our objective is to support teams in building will, building capability and making improvements; supported by the establishment of the ASPH QI Academy (our in-house training programme). Our ‘Be the Change’ programme went from strength to strength and successful projects include:

- Improving ‘skin-to-skin’ time for new mums and babies through the ‘Project Joey’ initiative, resulting in improved breast feeding rates on discharge from hospital
- Reducing the rate of surgical site infections for patients undergoing surgery for a fractured neck of femur
- Improving the individualised compassionate care for patients in the Senior Adult Medical Service (SAMS) wards through the adoption of the ‘What matters to you?’ approach

Digital developments

This year we embedded our electronic medical records (eMR) system, which means we no longer store paper medical records. In maternity we introduced a tailored digital system known as BadgerNet to replace the traditional folder of handheld notes. It can be accessed by both women and healthcare professionals, via computer and mobile app, to record all aspects of care during the antenatal period and labour.

Going forward we want to develop the electronic ordering of diagnostic tests such as blood tests and x-rays, in conjunction with our pathology partners at other local Trusts.

Developing our business

As in previous years the total number of referrals to the Trust continued to rise with a 14% increase in 2017/18 compared to the previous year. The specialities with the highest referral levels continue to be musculoskeletal services (MSK), dermatology and ophthalmology.

On 1st April 2017 several services joined the Trust, including The Bradley Unit for neurorehabilitation based at Woking Community Hospital, community Parkinson’s and Multiple Sclerosis nurses, two local Early Supported Discharge teams for stroke care and the community based physiotherapy teams from Weybridge and Woking Community Hospitals. We also won the contract from North West Surrey CCG to provide a new model of dermatology care.

We also saw the transfer of two services to other providers, following some changes in commissioning arrangements. Behavioural paediatric services are now provided by Surrey and Borders Partnership NHS Foundation Trust and sexual health services (previously provided in the Blanche Heriot Unit) by Central and North West London NHS Foundation Trust. We would like to thank both teams for providing such good care for our patients for many years and helping us with the safe transition of these services.
Listening and acting

The views and opinions of our patients on their experiences at Ashford and St. Peter’s Hospitals provide valuable insight into what we do well and what we need to do better. We collect feedback in a range of different ways to enable us to plan improvements.

What our patients tell us

This year’s National Inpatient survey (sent to patients who had spent at least one night in hospital during July 2017) showed our scores remain relatively static compared to previous years.

Looking closely, compared to the previous year the Trust has marginally improved in a number of areas including waiting to get a bed, the hospital and ward, doctors and your care and treatment, which means that patients overall are reporting a slightly better experience. However, there were two specific questions where the Trust was slightly worse nationally - noise at night and being given clear written or printed information about medicines on leaving hospital.

Keeping in touch

NHS Choices continues to be a popular way for people to instantly share experiences and feedback. A growing number of patients are also using Facebook and Twitter – particularly as a way of sharing immediate praise, concerns or frustrations. We monitor this feedback throughout the day and always aim to respond in a timely, positive and helpful way.

Regular feedback

We are delighted that the percentage of patients recommending our services through the ‘Friends and Family Test’, 95% of those patients would recommend us - which is our target satisfaction rate.

Dealing with issues and complaints

Over the past year our Patient Advice and Liaison Service (PALS) received 1872 requests for information or were asked to address concerns. This is a slight decrease (15%) from last year. The majority of people (801) were contacting PALS about an outpatient appointment, though we also helped 519 people who contacted us with requests for information or communication. This year we received 416 new formal complaints which is a slight decrease (-6%) from last year.

What our patients say

Our Patient-Led Assessments of the Care Environment (known as PLACE) inspections were carried out at both our hospitals in March 2017. As in previous years we received broadly good scores for the quality of our environment.

We were particularly pleased to see scores above the national average again for ‘dementia’ and ‘disability’. Our hospitals continue to undergo a programme of painting and refurbishment works, to address the areas for improvement where our scores were lower – such as condition, appearance and maintenance.

<table>
<thead>
<tr>
<th>Areas:</th>
<th>Ashford Hospital</th>
<th>St Peter's Hospital</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleanliness (of hospital areas)</td>
<td>99.83%</td>
<td>99.77%</td>
<td>98.38%</td>
</tr>
<tr>
<td>Food</td>
<td>91.07%</td>
<td>93.78%</td>
<td>89.68%</td>
</tr>
<tr>
<td>Privacy, Dignity and Wellbeing</td>
<td>87.33%</td>
<td>89.42%</td>
<td>83.68%</td>
</tr>
<tr>
<td>Condition, Appearance and Maintenance</td>
<td>92.09%</td>
<td>92.31%</td>
<td>94.02%</td>
</tr>
<tr>
<td>Dementia</td>
<td>82.53%</td>
<td>73.80%</td>
<td>76.71%</td>
</tr>
<tr>
<td>Disability</td>
<td>93.00%</td>
<td>89.23%</td>
<td>82.56%</td>
</tr>
</tbody>
</table>
Investing in the environment

Expansion of our Intensive Care Unit

On 30th May 2017 we were delighted to welcome special guest Lady Forsyth-Johnson (model and wife of Sir Bruce Forsyth), along with the Mayor of Runnymede, to officially open our newly expanded Intensive Care Unit.

The beds previously located on the High Dependency Unit were moved into the new part of the Intensive Care Unit, meaning all critical care beds are now located in one place. This is much better for both patients and staff and means that more specialist support is quickly available in the event of a patient deteriorating.

New Endoscopy and Neurophysiology Units

Last year we undertook a £2 million capital project to create much needed clinical space by infilling a courtyard at St. Peter’s Hospital. This enabled the expansion of the endoscopy unit into a new wing on the upper floor – providing a new nurses’ station, waiting area, preparation room, endoscopy room and four-bedded recovery area. This expansion was essential for us to keep up with a year-on-year increase in demand for diagnostic tests and to provide single sex accommodation in recovery.

The new space on the ground floor was used to relocate our neurophysiology service from very old accommodation on the ramp, supporting our longer-term plan to demolish the ramp completely. This move was long-awaited by the neurophysiology team and the new location and facilities work much better for colleagues and patients alike.

Development in our Neonatal Intensive Care Unit (NICU)

Our NICU was expanded with a new room and the addition of four cots last year. The additional cots will really help to manage demand for NICU services at busy times. The unit is the only one of its kind in Surrey and one of only three across the Kent, Surrey and Sussex network – so we retrieve babies who require intensive care from hospitals far afield until they are well enough to return home or back to their local hospital.

NICU also received a huge boost from Mallinckrodt plc, a leading pharmaceutical company, following receipt of a £100,000 donation, which will help develop facilities and provide extra, specialist, training for the nursing team. We are very grateful to Mallinckrodt plc for their generosity.

Opening of new Ophthalmology Suite

In November we opened a new Ophthalmology Suite at Ashford Hospital. This was a culmination of a year of hard work by the team, who undertook an experienced based co-design project, working in partnership with patients to make improvements to the services we provide to those with Age-Related Macular Degeneration. It’s an approach we are using increasingly at our Trust – getting patients involved in the evaluation of our services and working with them to identify ways of making meaningful improvements.
Our Quality Account

Each year hospital Trusts are required to produce a Quality Account, which is a detailed report to the public about the quality of services that we deliver. This is just a brief summary of our achievements over the past year and priorities for the year ahead and if you would like to read the full account, you can find it on our website.

How we did in 2017/18

Improving harm free care

We continue our drive to eradicate ‘avoidable harm’ and our highlights from 2016/17 include:

Our Maternity Thermometer performance, which measures combined maternity harm free care, exceeded the national average of 74.0%, achieving 86.0%, which is a huge improvement from the 2016/17 figure of 72.3%.

This year we have exceeded our target to risk assess 97% of adult inpatients for Venous Thromboembolism (VTE) again, achieving 98.9%, and were delighted that we continue to have VTE Exemplar Centre status by NHS England. We also have significantly improved on our root cause analysis of identified cases of hospital acquired associated thrombus in two months, achieving 100% compared to 0% in 2016/17.

Medication Safety is one of our key quality priorities for 2018/19 and we have improved in four out of the six measures for 2016/17.

Our Clinical Workforce

One of our particular successes from the year is around strengthening safety standards for our clinical workforce, which includes:

Reducing variation in patient care through our 7 Day Service Provision, which seeks to ensure patients who are admitted as an emergency receive high quality care whatever day of the week they enter hospital. This is progressing well and on track and will continue to be a priority going forward.

We have introduced a new Nursing Associate role at the Trust in conjunction with Health Education England, working across boundaries and professional groups, which has been really successful.

Our Freedom to Speak up Guardians have continued to be successful in actively promoting the service to our staff, including introduction of an electronic notification system through our Intranet to aid colleagues in raising concerns easily and effectively.
Improving the experience of vulnerable patients

We continue to focus our efforts on improving the experience of vulnerable patient groups, such as those with dementia and / or learning disabilities.

We recently introduced new specially trained volunteers, piloting this first with our dementia patients with positive results. We plan to extend this volunteering role across the Trust for other vulnerable patient groups.

Working with social care colleagues we began a Red Bag pilot scheme to foster closer working relationships with a group of nursing and residential home providers.

When a patient comes into A&E from one of these homes they will bring a red bag with them, containing their ‘My Care Passport’, medicines, medication documentation, personal belongings and essential items. It’s a way of ensuring that important information to help personalise care for that patient is shared and that important belongings (dentures, glasses) are kept with them and safe during their time in hospital.

Diagnosing diabetes

Diabetes is a growing problem, but early diagnosis can really help the management of this disease and prevent difficult complications arising. Our goal is to screen 98% of eligible patients, via blood glucose testing, within 24 hours of admission. Last year we achieved 96%, which is higher than the previous year (93%) but still short of our target. We continue trying to improve our performance.
Working with our local partners

We continue to be a strong partner within the Surrey Heartlands Health and Care Partnership, leading and participating in a number of the key workstreams. Successes to date include:

- Supporting the partnership’s focus on the first 1000 days through a 24/7 advice line for pregnant women and the introduction of BadgerNet, a single shared care record for pregnant women across the area.
- Introduction of the ‘Handi-App’ across North West Surrey – easy access to help and advice for parents/families on the right care for babies and children, which will help reduce A&E attendances not requiring treatment or interventions (with 93% satisfaction rate so far) for those children
- Catheter project – roll-out of catheter care training which is reducing non-elective admissions [to hospital] of patients from care homes.

Learning from Deaths

In March 2017 the National Quality Board issued a framework for acute Trusts to learn from patient deaths to identify areas where care is good or needs improving, introducing a new review framework. We have made good progress so far and a Mortality Committee, Chaired by the Medical Director, has oversight of the programme. A key focus for 2018 is determining ways to share the learning widely across clinical specialties.

Our Quality Priorities for 2017/18

- Reduce harm from medication errors which is our highest priority area
- Embed our Learning from Deaths improvement programme
- Improve the timely identification and treatment of patients with Sepsis
- Improve individualised care planning for patients at the end of life
- Reduce the numbers of inpatient falls resulting in harm
- Continue our work to reduce hospital acquired pressure ulcers
- Implement a new measure of patient satisfaction to guide targeted improvements in care
- Re-design our process and timescales for responding to complaints

As part of this we’re also a key partner within the newly formed North West Surrey Health and Care Partnership, an alliance of local health and care, borough councils, voluntary and community organisations. The partnership is currently focused on developing better out of hospital services and looking at the urgent care pathway.
Spending your money wisely

In 2017/18 we had a turnover of £306.5 million and finished the year with a substantial and unexpected surplus of £18.9 million, nearly £4 million higher than we had been expecting, putting us amongst the most efficient acute Trusts in the country.

Our surplus means we can invest in much needed capital schemes, some of which have already been identified for the coming year (such as digital developments and a new multi-storey car park) along with much needed backlog maintenance, and an opportunity to make some further capital improvements for patients and staff.
How our organisation is run

Our board comprises the Chairman, seven Non-Executive Directors and seven Executive Directors.

We were delighted to welcome our new Chairman, Andy Field in September 2017.

This has been my first year as Chair of Ashford and St Peter’s Hospitals. I joined on 4th September 2017 and it has been a hugely enjoyable and rewarding first nine months. Consistent with the Trust’s open culture, I have been made extremely welcome and have enjoyed getting out and about meeting teams across many services and departments, as well as our local partners. I’ve been extremely impressed by all that I’ve seen and particularly by the commitment of colleagues across the Trust.

Andy Field pictured here at the opening of our recently refurbished Play and Sensory Room in the Paediatric Unit, in partnership with Momentum Children’s Charity and Berkeley Homes.

There have been many other changes to our board and we would like to thank Terry Price who stepped down after nine years as a Non-Executive Director at the end of December.

We would like to welcome Marcine Waterman who joined us officially on 1st April 2018 as our new Non-Executive Director.

We would also like to welcome Sue Tranka as our new Chief Nurse following the departure of Heather Caudle last September.

As a Foundation Trust we are accountable, via elected representatives on our Council of Governors, to our members who are patients, staff and residents in our community. The Council includes appointed Governors from our partnership organisations and Governors who represent different groups of staff.

In addition to the role of listening to, and reflecting back, the views of the membership to the Board and vice versa, the Governors have also been consulted on the development of the Annual Plan for 2017/18 and been involved in agreeing our quality priorities.

We would like to acknowledge the contribution made by Prof Jill Shawe, Appointed Governor for the University of Surrey; and John Collins, Public Governor for Surrey Heath who both stood down in 2017.

Our Council of Governors – representing the local community

As a Foundation Trust we are accountable, via elected representatives on our Council of Governors, to our members who are patients, staff and residents in our community. The Council includes appointed Governors from our partnership organisations and Governors who represent different groups of staff.

In addition to the role of listening to, and reflecting back, the views of the membership to the Board and vice versa, the Governors have also been consulted on the development of the Annual Plan for 2017/18 and been involved in agreeing our quality priorities.

We would like to acknowledge the contribution made by Prof Jill Shawe, Appointed Governor for the University of Surrey; and John Collins, Public Governor for Surrey Heath who both stood down in 2017.

Richard Docketty our Staff Governor, pictured here at our Annual Members Meeting 2017.
Looking to the future

Like other local health and care organisations, there are a number of external factors and uncertainties that will impact on our future and our ability to continue to offer the best healthcare to patients.

We have spent considerable time this year developing a new five year strategy within this context and the clear need for collaboration and partnership working which creates strong foundations for creating and benefiting from strategic opportunities. It is also consistent with local and specialist commissioning strategies and the Surrey Health and Wellbeing Strategy.

We will continue to play a key role within the Surrey Heartlands Health and Care Partnership and the developing North West Surrey Health and Care Partnership, an alliance of health and care organisations across the North West Surrey footprint, also working with wider partners including the Borough Councils and the voluntary sector to ensure delivery of care at local level.

Our new strategic objectives have been set as follows:

- And every member of our team to feel able to give their best and feel valued for doing so.

We are also extremely pleased to receive outline planning permission from Runnymede Borough Council for our joint proposal with Surrey and Borders Partnership NHS Foundation Trust to redevelop and sell a section of surplus land on the St Peter’s site. This will support a critical investment to redevelop and expand our urgent and emergency care services, as well as developing additional and improved accommodation for staff onsite.

Our refreshed vision – ‘to provide an outstanding experience and best outcomes for patients and the team’ – is supported by our values (the four Ps), and our mission ‘to ensure the provision of high quality, sustainable healthcare services to the communities we serve’.

By achieving our aims, we want every patient to be able to say:
- I was treated with compassion;
- I was involved in a plan for my care which was understood and followed;
- I was treated in a safe way, without delay

Thank you to our partners and friends

We would like to publically thank everyone who has made a contribution to our hospitals over the last year; to our 3800 members of staff and 450 volunteers. Also to our members, NHS colleagues, our partners in social care, local voluntary and community organisations, carers, the Ashford Hospital League of Friends, the Friends of St. Peter’s Hospital, Radio Wey and all those who have raised invaluable funds to help enhance our services.

Thank you.
Our values

- Patients first
- Personal responsibility
- Passion for excellence
- Pride in our team

This review just gives a snapshot of the work we have been doing on behalf of our patients over the last year. For a copy of our full Annual Report and Accounts, see our website at www.asph.nhs.uk.

This report was produced by our Communications Team, based at St Peter’s Hospital, Guildford Road, Chertsey, Surrey, KT16 0PZ.

01932 722163
asp-tr.comms.mailbox@nhs.net

Ashford Hospital
London Road, Ashford, Surrey, TW15 3AA
01784 884488

St Peter’s Hospital
Guilford Road, Chertsey, Surrey, KT16 0PZ
01932 872000

If you require this document in any other format please contact our Patient Advice and Liaison Team on 01932 723553.

Follow us on Twitter @ASPHFT
Find us on Facebook (Ashford & St Peter’s Hospitals NHS Foundation Trust)
www.ashfordstpeters.nhs.uk

Printed July 2018