

REPORT TO: HEALTH OVERVIEW AND SCRUTINY PANEL

DATE OF MEETING: THURSDAY 6 FEBRUARY 2020

SUBJECT OF REPORT: WESTON AREA HEALTH NHS TRUST – UPDATE ON PERFORMANCE, AND AN OVERVIEW OF PROGRESS TO DATE ON THE PROPOSED MERGER WITH UNIVERSITY HOSPITALS BRISTOL NHS FOUNDATION TRUST.

OFFICER PRESENTING: PETER COLLINS, MEDICAL DIRECTOR

RECOMMENDATIONS:

This report is provided to members for consideration and discussion.

1 SUMMARY OF REPORT

The following report provides an overview of the Trust's performance and its progress against the Care Quality Commission (CQC) recommendations following their most recent inspection.

The Trust remains in a challenging position financially and operationally. However, good progress has been made, particularly in relation to addressing the areas identified for improvement by the CQC.

Significant progress has been made in planning for a successful merger with University Hospitals Bristol NHS Foundation Trust (UH Bristol) on 1 April this year, to create a combined organisation of over 13,000 staff aiming to deliver exceptional local services for local people and specialist services across the South West and beyond. The name of the newly formed Trust will be University Hospitals of Bristol and Weston NHS Foundation Trust.

2 QUALITY AND SAFETY

In February and March 2019, the CQC undertook a full inspection of 4 core services of the Trust - Urgent and Emergency Care, Medicine, Surgery and Child and Adolescent Mental Health Services (CAMHS) - along with a Well-Led review and a review of Use of Resources. A Section 29a warning notice was issued in April 2019 for both CAMHS and the Emergency Department, where it was judged that the quality of healthcare provided required significant improvement.

The CQC's inspection report was published on 26 June 2019 and rated the Trust overall as 'Requires Improvement'. While improvement was noted in some areas since their previous inspection in March 2017, the CQC set out a number of 'Must Do' and 'Should Do' actions for the Trust. The Trust has put in place a comprehensive quality improvement plan to address these areas.

In September 2019, the CQC carried out an unannounced inspection to review progress against the action plan. The CQC found the Trust had made significant progress since their inspection in February 2019 – especially in CAMHS, where the CQC confirmed that the Trust had met the quality and safety requirements identified at the time of the original inspection. The Trust continues to build on this progress.

The CQC observed that, while improvements had been made in urgent and emergency care, further work was required, such that the Trust remains under a CQC Warning Notice relating to its Emergency Department. The Trust has worked hard to strengthen governance and supervision in the department and, in collaboration with NHS partners across the region, to enhance the learning and development opportunities for nursing and medical staff.

There was good departmental engagement in developing the plan to ensure local ownership of its delivery. The plan has executive leadership and oversight and internal confirmation of progress against the actions is through the presentation of supporting evidence to the Trust Board's Quality and Safety Committee on a bi-monthly basis.

Good progress has been made to date and the actions required to address the CQC warning notice are on track for completion by the 28 February 2020 deadline.

3 OPERATIONAL PERFORMANCE

Like most acute Trusts across the country, Weston General Hospital has faced significant and sustained demand for its urgent and emergency care services, with deleterious consequences for a number of key performance indicators across the Trust. The Trust's performance against key operational standards for the month of December is outlined below:

Referral to Treatment Times (RTT) - Performance is at 83.6% against a national target of 92%. Recovery plans and winter schemes to support cancer services and elective activity have started to show benefits but remain vulnerable to occasional staffing shortages at a time when substantive staff numbers are already low. The RTT position is subject to a data validation exercise which is intended to complete in February 2020.

Cancer services – December performance against the 62 Day referral to treatment time standard was 53.62% against a national target of 85%, with 13 of 32 patients treated beyond 62 days. This position was largely driven by staff shortages in particular specialties but a recovery programme involving additional, temporary staff and joint working with North Bristol NHS Trust is in place to rectify the issues. Performance against the Cancer 2-Week Wait standard for December, however, was 95% against a national target of 93%.

A&E waiting times – High attendance rates and high levels of escalation in the Trust at the start of winter have affected A&E waits significantly, with 4-hour performance averaging 69% against a national target of 95% and previous month performance of 74.71%. Continuing pressure on the Emergency Department and on bed capacity within the Trust has further challenged our 4-hour access performance. On average, the Emergency Department expects to see approximately 140 patients per day but recently there have been spikes in attendances in excess of 175.

Admission rate and Length of Stay – Sustained demand in the Emergency Department has a direct impact on the admission rate to inpatient beds. That said, the Trust remains the best performing Trust in the South West for emergency admission rates, achieving a conversion rate from A&E attendance to inpatient admission of 27%, when the South West average is 35%. Similarly, the average inpatient length of stay has reduced by 1.3 days from 6.8 days to 5.5 days, through improved discharge processes and the implementation of the Trust winter plan.

Winter planning – A number of additional initiatives have been introduced to manage demand and capacity during the winter period. These include:

- Improved patient triage and streaming in the Emergency Department – this will see the introduction of an additional defined clinical role to the department from 30 January;
- Increased Geriatric Emergency Medicine service in support of frail and elderly patients;
- Improved weekend discharge processes, including extended access to the Integrated Care Bureau to focus on complex discharges.

4 WORKFORCE

Workforce continues to be a significant risk for the Trust with recruitment remaining a key area of management focus. Vacancy rates in November were 12.5% against a target of 8%. This shortfall in substantive staff is mitigated as far as possible through the use of bank and agency staff, although this has an adverse impact on the financial position.

Staff turnover, by contrast, remains consistently within our maximum target of 15% and this is testament to several recruitment & retention initiatives in place, as well as the care and attention given to handling the significant organisational change that comes with the planned merger with University Hospitals Bristol.

In that regard, a Transfer of Undertakings (Protection of Employment) (TUPE) consultation with staff employed by the Trust ran from 2 December 2019 to 31 January 2020. Further detail is given in the merger update below.

5 FINANCE

The Trust remains in a challenging financial position. At the end of December, the Trust reported a deficit of £11.4m. The forecast outturn for 2019/20 is a deficit of £16.7m. The Trust remains focussed on the delivery of its cost improvement plans and reduction in agency spending.

6 PLANNED MERGER WITH UNIVERSITY HOSPITALS BRISTOL NHS FOUNDATION TRUST

The Boards of UH Bristol and Weston Area Health NHS Trust (WAHT) are proposing to merge the Trusts on 1 April 2020. Significant progress has been made in planning for a successful merger, to create a combined organisation of over 13,000 staff aiming to deliver exceptional local services for local people and specialist services across the South West and beyond.

Significant benefits will come from building on the many years of partnership working between the two Trusts and taking the step to become a single organisation. These include:

- A better experience for our patients – ensuring people from North Somerset and surrounding areas will be able to be seen and treated in their local hospital, and improving access to specialist services in both Bristol and Weston through better use of an expanded workforce, estates and facilities.
- A 13,000+ strong workforce increases our diversity, capacity and resilience, allowing for greater development opportunities for our staff across a much wider portfolio of services, strengthening the knowledge base, peer support and skills and experience of all our employees.
- The opportunity to share expertise and best practice – particularly in the delivery of exemplar models of frailty, ambulatory and out-of-hospital care. Using the opportunity to develop and learn from each other to create truly joined up care which enables people to stay in their own home, or return home as soon as they no longer need our care.
- Accelerating the roll out of digital technology to enhance and improve the quality and delivery of services across the new organisation, further cementing our Digital Exemplar status.
- Releasing untapped potential in our services – particularly in the development of medical and surgical ambulatory care, nurturing innovation, and research and empowering our teams to design services and pathways at the forefront of care.

Both organisations are committed to the merger and delivery of these benefits. Following Board approval at the end of November 2019, the transaction business case for the merger has now progressed to the next stage of review and assessment from our regulators.

New name for the combined Trust: At the point of merger, the newly formed organisation will be named University Hospitals Bristol and Weston NHS Foundation Trust. There will be no change to any of the names of our constituent hospitals e.g. Weston General Hospital, Bristol Royal Infirmary and so on.

TUPE transfer consultation: WAHT are currently leading the TUPE consultation with staff, which commenced on 2 December and will end on 31 January. There have been multiple communication and engagement activities undertaken to support staff through this process. Following review of feedback obtained during the TUPE consultation process, Weston staff will receive a letter at the beginning of March confirming the outcome of the consultation and the transfer of their employment to the new Trust.

Service integration: Plans to integrate clinical and corporate services continue to be developed by clinical and non-clinical teams from both organisations, with a core focus on delivering the safe operation of services from day 1. Integration of corporate services will take place in a phased way from April 2020 with a view to fully integrating these services by the autumn. WAHT's clinical services will initially operate as a separate clinical division of University Hospitals Bristol and Weston NHS Foundation Trust with a view to full integration of these services by March 2022.

Cultural integration: An organisational and cultural integration programme is underway to create the conditions pre-, during and post-merger to ensure we have an engaged and committed workforce for the future and to develop an inclusive culture, that will attract, develop and retain exceptional people. A cultural diagnostic has been undertaken in WAHT following 5 cultural themes:

- Vision & Values
- Goals & Performance
- Support & Compassion
- Learning & Innovation
- Teamwork

This work is being brought together with a cultural assessment undertaken in UH Bristol relatively recently. In addition, several 'Hopes and Fears' workshops have been held on both sites with more sessions planned in February.

The findings from these activities will be brought together and used to help to shape the organisational and cultural integration programme post-merger, which will set out our plans to build shared values and a single, inspiring vision for the merged organisation.

Managing risk and realising benefits: A Post-Transaction Integration Plan (PTIP) sets out the process being followed by the Merger Programme Board to manage the risks and realise the benefits of the merger. To ensure sufficient focus, a Risk and Benefits Management sub-group has been established to:

- Track the progress of the delivery of benefits against the agreed measurement criteria within the four themes identified in the PTIP: Quality, Finance, Operational and Workforce;
- Consider risks to delivery of benefits that are escalated from individual workstreams and agree mitigations;
- Review current and emerging programme, transaction and integration risks, ensuring that they are appropriately assessed and managed by designated risk owners through the Trust's formal risk management system.

- Reporting high risks and mitigating actions at the Merger Programme Board on an exception basis.

Next steps: In addition to the dates outlined above, a thorough review and approvals process is currently underway. Key milestones are set out below:

January

- Regulatory and Department of Health and Social Care scrutiny of plans and the process to bring our organisations together.

February

- Regulatory scrutiny continues and final documents and plans for the merger are approved, including the post-merger integration plan, by relevant Trust Committees
- Extraordinary Trust Board to consider and approve the Board Certification Pack
- Board to Board Meeting with NHS England and Improvement (NHSEI) to review the Reporting Accountant's opinion on the transaction and information supporting the risk rating process.

March

- NHSEI issue a transaction risk rating to UH Bristol
- The Trust Boards meet separately to approve the transaction, subject to satisfactory completion of the regulatory process
- UH Bristol Council of Governors meets to approve the process
- Final submission and application to merge sent to Department of Health and Social Care for consideration
- Late March - Letter of support from the Secretary of State
- Late March - NHS Improvement grants formal application for statutory transaction
- Late March – WAHT Trust Board completes all activities required to confirm dissolution and transfer of responsibilities
- 30th March UH Bristol Trust Board confirms receipt of the grant of acquisition.

April

- Subject to regulatory and Secretary of State approval (as outlined above), UH Bristol NHS Foundation Trust and Weston Area Health NHS Trust merge on 1 April to become University Hospitals Bristol and Weston NHS Foundation Trust
- The employment of WAHT staff transfers to the new organisation.

Robert Woolley
 Chief Executive
 Weston Area Health NHS Trust
 27 January 2020