

Investing in Excellence Through Partnership

Annual Report & Summary Accounts 2004/2005



## **Exceeding expectations**

busy year at our three hospitals. Working hard to reduce the time that people have to wait for operations and appointments, we have some of the shortest waiting times in the UK. Recognised as a centre of excellence for many specialities including neurosciences and orthopaedics, we continue to develop our world renowned services and attract top calibre staff

to treat and care for communities living and working in Coventry, Warwickshire and beyond.

The Trust is also considered a pioneering force in the field of community regeneration and is due to open the new £400 million 'super' University Hospital in Coventry next summer. As the principal teaching hospital for the new Warwick Medical School we are delighted that the first cohort of students graduated in July 2004 and that they have now embarked on their medical careers many of

them working at this Trust. Our innovative approach to partnership working with Europe, local industry, public and private sector partners, aviation and Coventry and Warwick Universities has already resulted in job creation, key worker housing projects and the prospect of a healthcare technology park development which will utilise the skills of the Midlands motor trade and other manufacturing industries such as robotics and rapid prototyping to benefit health.

We are delighted that we scored well in the government's star ratings, but more important to us are the hundreds of thank you letters we have had from patients for the care they received. We know that to really achieve improvements in our services we need to listen to the views of the people who use our hospitals and the people who deliver the care; we continue to encourage patient involvement and staff views. Together they have been key to our decision making about service improvements that are identified in some of the amazing stories outlined in this calendar.

We hope you enjoy reading the articles and that when you are browsing through the pages please remember that many of these developments would not have been possible without the 100 per cent commitment of our outstanding staff and volunteers.

David Roberts
Chief Executive
5 September 2005

Bryan Stoten Chairman 5 September 2005

# OCT 2005

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### What a transformation!

voung mum who suffered from a rare heart condition that left her too short of breath even to play with her children is now looking forward to joining in the school sports day thanks to heart specialists at Walsgrave Hospital. Charlotte Barker, aged 30, from Tamworth suffered from a rare heart condition Hypertrophic Obstructive Cardiomyopathy (HOCM), which meant that part of her heart muscle had become so abnormally thickened that it was restricting the flow of blood out of her heart. This left her short of breath to do the simplest of things like walking or going upstairs. Charlotte was referred to cardiologist Dr Peter Glennon at Walsgrave Hospital, who performed new keyhole surgery under local anaesthetic. This involved passing a small tube (catheter) into the heart through an artery, and carefully "knocking out" the blood vessels supplying the thickened area of heart muscle. Effectively this produces a tiny heart attack localised to the abnormal area. The thickened muscle shrinks back. allowing blood to flow freely out of the heart again.

Just four days after the operation Charlotte was back home with her family. Walsgrave Hospital is one of a handful of hospitals across Europe and the first in the Midlands to offer this treatment. The latest techniques in X-ray and ultrasound are used to guide the catheters within the heart. Previously this rare condition would have required open heart surgery under general anaesthetic and a much longer stay in hospital.

Charlotte added: "I cannot believe how this operation has transformed my life. I could only walk a few steps before getting out of breath and I certainly could not do the things other mums do with their children like take them to play in the park. Peter Glennon and his team were fantastic and I have a new lease of life thanks to their skill. I cannot thank them enough. Before my operation I couldn't manage to go upstairs, I used to have to stop halfway and sit down for a rest. I feel so much better now."

The Cardiac Unit is a leading centre for the diagnosis, treatment and care of patients with a wide range of heart conditions, with a strong reputation for providing high standards of surgical, paramedical and nursing care to patients across Coventry, Warwickshire and beyond. Building on its success the appointment of additional internationally renowned consultants and the development of highly skilled specialist nurses has enabled further expansion of the unit.

The Healthcare Commission commended Walsgrave Hospital's cardiac services. The Unit's survival rates for these procedures are among the best in the UK.



#### First Choice for Care

University Hospitals Coventry and Warwickshire NHS Trust is a major healthcare provider for Coventry, Warwickshire, South West Leicestershire and beyond, serving a combined population of around one and a half million people.

As one of the largest organisations of its type in the UK, the Trust has 1,417 beds, around 7,000 staff and spends over £330 million a year on hospital services.

The Trust, which was established in 1998, operates from three sites:

- Coventry and Warwickshire Hospital in Coventry
- The Hospital of St Cross in Rugby
- Walsgrave Hospital in Coventry

The Trust was granted University status in October 2000 and provides all aspects of acute and maternity care including the following regional specialities: renal dialysis and transplantation centre; neurosurgery; cardiothoracic surgery and invasive cardiology; cancer services; major trauma for the eastern part of the West Midlands and neonatal intensive care.

The Trust's mission is to ensure patients receive 'the right treatment at the right time in the right place by the right people.'

It is underpinned by five principles with an aspiration to be recognised nationally and internationally as setting the standard for healthcare, teaching and research.

In short the five principles are: to provide healthcare as good as the best, in world class facilities, at the forefront of innovation, whilst being an employer of choice and at the heart of the community.



# NOV 2005

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## Against the Odds!

um Naomi Doherty came back to life not once but twice after giving birth to twins. Naomi received the last rites but pulled through against all the odds when she was diagnosed with a rare heart condition which affects one in 10,000 pregnancies. Naomi had problems during the last four months of her pregnancy and had trouble breathing. She was rushed to Walsgrave Hospital for a caesarean section and developed problems after the birth of the twins. Doctors diagnosed that she was suffering from peri-partum cardiomyopathy. Naomi, who now takes daily medication for the condition, was so grateful for her treatment that she decided to name her twins after the doctor.

Naomi is one of thousands of grateful hospital patients in Coventry and Rugby, who have said they are waiting less time for emergency treatment, which was highlighted in a patient opinion survey published by the independent Healthcare Commission. The Trust was placed in the top ten best performing Hospital Trusts with 88% of our patients reporting that their stay in the emergency department was no more than four hours. This figure has now risen to 98%.



The survey also showed that the Trust was rated in the top 20% of Trusts for:

- Doctors and Nurses taking time to listen to what patients had to say
- Patients feeling able to discuss their fears or anxieties about their condition or treatment
- The amount of information given to patients about their treatment or condition
- Patients having confidence in the doctors and nurses treating them



### **Star Provider**

ust two and a half years after being zero rated, University Hospitals Coventry and Warwickshire NHS Trust has become a three star rated Trust and is now rated as one of the UK's premier hospital services and awarded the highest rating in this year's national NHS performance ratings.

The rating is a tribute to the magnificent effort put in by staff who have worked tirelessly to continue to improve patient care, reduce waiting times and be at the leading edge when it comes to developing new treatments.

The performance ratings show that we achieved all the key targets that were set by the Government and we were placed in the top band of performance in all 3 focus areas; ie Clinical focus, Patient focus and Capacity

Capability. This represents an even greater improvement and indicates that the Trust is continuing to go from strength to strength.

The Trust is now ranked amongst the top performers nationally in categories measuring things such as: waiting for emergency care, clinic appointments and inpatient treatments, access to cancer experts within 2 weeks of being referred by the GP as well as developing strategies to reduce hospital infections which has resulted in the Trust being in the top five hospitals for low MRSA rates. It received top marks in many areas including:

- Child Protection
- Thrombolysis treatment times
- Good hospital food
- High quality breast cancer treatment
- Waiting times for rapid access chest pain clinic
- Waiting for revascularisation
- Good financial management
- Rigorous clinical governance systems

The Trust was also rated as above average in:

- Low % of deaths within 30 days of surgery
- Low % of deaths within 30 days of a heart bypass operation
- Good hospital cleanliness
- Good management of patients' complaints
- Good human resource practices and management of staff
- Cancelled operations for non-clinical reasons
- Good management of the transfer of care of patients

All of this has been achieved against the challenge of increased patient attendances during the year. Our three hospitals dealt with more emergencies, saw more outpatients and delivered more planned care (daycase and inpatients). Not to mention the additional challenge of moving the A&E services into the newly expanded Emergency Department at Walsgrave Hospital, moving the maternity, gynaecology and neonatal services into the West Wing and the other related moves.

This was wonderful news for everybody involved with University Hospitals Coventry and Warwickshire NHS Trust - our patients, staff and volunteers. Thanks go to all those who have put in so much effort to meet the challenges we have faced, especially following the disappointment for everybody of becoming a zero rated star Trust. All of our staff's hard work has ensured that our patients now get some of the best healthcare services.

Chairman Bryan Stoten, said: "Our staff work tirelessly to provide high quality healthcare and this year those efforts have been rewarded by the Trust gaining its three star status. In just 21/2 years, we have made fantastic progress in delivering the standards of care and general experience that patients have every right to expect. Despite treating thousands more patients, waiting times have continued to come down for appointments and treatments, we have made improvements in the way we deliver care to patients, developed improved facilities such as the new emergency department and Stroke Unit at Walsgrave Hospital. - and all within the financial limits that we were allowed. I am delighted by the achievement and very proud of our excellent staff."

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## Oh baby what fantastic facilities!

rime Minister The Right Hon Tony Blair MP, officially opened the state of the art Women's Unit at the new £400m University Hospital. During the visit the Prime Minister met midwives, new mums and their babies, and other hospital staff. He saw some of the finest facilities in Europe that feature more admission rooms and labour suites, a mobilisation area where women can walk around or sit in comfort during their labour, and Coventry's first birthing pool. With mums from as far afield as Leicestershire being attracted to the Women's Unit in the new University Hospital because of the first class facilities and the high quality of services, staff have already noticed an increase in the number of babies being born there.

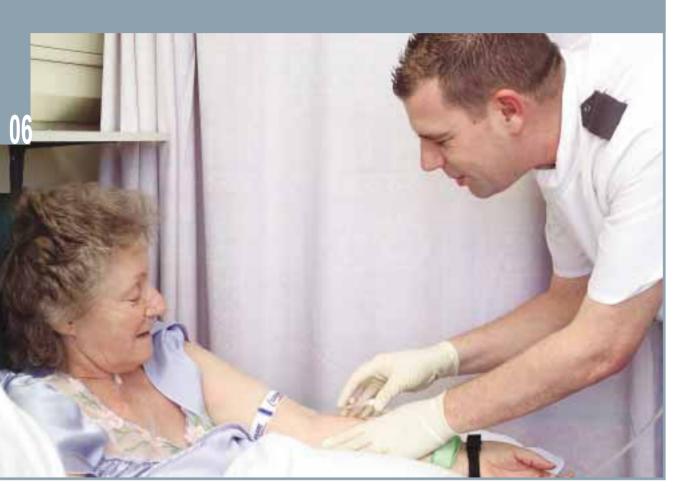
The new unit will see over 4,500 births a year, cared for by nearly 400 staff. It has 27 neonatal cots and provides gynaecology, maternity and new born services for the women of Coventry, Warwickshire and beyond.

The regional neonatal unit cares for over 500 sick and premature babies each year and has new "touch-screen"

monitoring equipment to detect health problems before a baby shows any physical signs of deteriorating. New incubators also allow greater interaction between parents and their newborn babies. In addition, a new ultrasound scanner helps to detect abnormalities in premature babies earlier. Parents with a baby being cared for in the neonatal unit are able to stay with their child 24 hours a day in dedicated overnight parent accommodation.

Carmel McCalmont, Head of Midwifery said: "We were delighted that the Prime Minister opened our new Unit which is providing some of the best maternity facilities not only in UK but in Europe." Harpal Kaur, mum to the first baby born in the Women's Unit said: "The staff were excellent and the facilities were great."

During his visit the Prime Minister praised the hard work and dedication of hospital staff and said: "I am delighted to be here today to open this fabulous new women's unit. There is nothing like the dedication of NHS staff and I would like to thank all the staff here for their hard work."



What a Result!

benefiting from some of the shortest waiting times in the UK. Instead of just meeting the Government's target to reduce the number of people waiting for an operation, we have exceeded the national waiting time targets of 17 weeks for outpatient appointments following GP referral and 9 months for inpatient and day case operations.

We have worked hard to reduce the length of time patients wait for an operation. Indeed no patients wait:

- more than 13 weeks for an outpatient appointment
- more than 6 months for an inpatient or day case operation
- and no more than 3 months for revascularisation treatment.

We also achieved the national 98% target of patients not waiting more than 4 hours in A & E.

The Trust's target to reduce the number of people waiting for an operation was 5,722 by 31st March 2005. At the end of March the final figures showed that the Trust had 5,694 people waiting which is 28 less than the target.

The environment in which patients are cared for is just as important as the treatment they receive and the time they wait. Our staff at all of our three hospitals work very hard to ensure patients visit clean and welcoming hospitals. In the last year, our three hospitals have been ranked as among the cleanest in the country. The Department of Health figures show that Coventry and Warwickshire Hospital, Walsgrave Hospital and the Hospital of St Cross in Rugby were rated as good or acceptable for cleanliness and for the quality of

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## Leading the way

oventry women are among the first in the UK to benefit from new state of the art digital breast screening technology which enables more women to be screened, gives instant images and uses less radiation than traditional screening methods.

University Hospitals Coventry and Warwickshire NHS Trust is regarded as a national leader in the field of breast care and was chosen, on behalf of the NHS Breast Screening Programme, to test and evaluate new digital mammography equipment which can be used on mobile screening units. The new equipment which is being used on the mobile screening unit reduces the length of time it takes to screen women and provides instant images which help to prevent women having to be recalled if the image is not clear enough for an accurate diagnosis.

Margot Wheaton, Programme Manager for the Warwickshire, Solihull & Coventry Breast Screening Service at Coventry and Warwickshire Hospital says: "We are very excited that we have been chosen to evaluate one of the first pieces of digital mammography equipment to be used in a mobile setting. The introduction of digital screening will hopefully allow us to see more women because the time taken may be shorter than before and the process will be even safer for women and mammographers because of the smaller radiation

doses. Also, traditional screening methods which rely on a film being developed before the breast images can be seen, sometimes meant that women had to be recalled for another screening session because the image was not clear enough or we needed another angle.

It is anticipated that digital mammography will gradually replace the existing mammography equipment at most breast screening units in the UK over the next few years.

Patient, Francis Preston, who was diagnosed with breast cancer says: "Anything that speeds up the diagnosis for women who suspect they have breast cancer has got to be good news. Also, before if it didn't turn out right, it would have meant having to come back for another appointment. Now the radiographer knows instantly if the image is ok, so that saves having to come back again, which can be worrying."

The Warwickshire, Solihull & Coventry Breast Screening Service automatically offers breast screening to approximately 140,000 women living in the area, between the ages of 50 and 70. Early diagnosis is the most successful way of treating this common condition. The latest mammographic and diagnostic techniques give all women an opportunity for a healthier future.



### Always ready to listen

le receive many hundreds of compliments during the year about the care that patients have received. We also have people writing to us offering suggestions on how services can be improved and we have a small number of people who are unhappy with their hospital experience.

We recognise the need to address complaints as quickly and thoroughly as possible to achieve two main aims:

- to provide the complainant with an informative and comprehensive explanation following an investigation into their concerns: and
- to learn from complaints for the benefit of future patients.

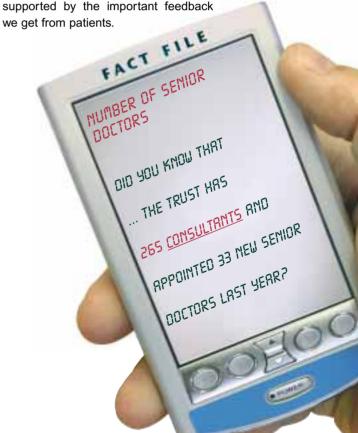
Last year we registered 409 concerns as formal complaints and we improved on the number of complaints we responded to in 20 working days having responded to 348 within the recommended time. 85% of our complaints were responded to under Local Resolution within 20 working days, which was a significant improvement on the 61% achieved the previous year, and from September 04 to March 05 we achieved 100%.

There was one request for an independent review under the old NHS Complaints System and 8 requests were received from the Healthcare Commission under the new process that came into effect in August 2004.

Complaints and patient feedback offer the Trust an excellent opportunity to improve our services wherever possible and so we take them very seriously. An example of improving our services as a result of consultation with patients is the introduction of restricted visiting times which patients welcomed because many said a constant string of visitors throughout the day was sometimes tiring and could disrupt mealtimes.

Other changes introduced through comments on patient questionnaires regarding cleanliness include changing

the role of the housekeepers and increasing the number of times toilets on wards are cleaned throughout each day. Over one thousand patients have responded to these questionnaires over the past year, enabling a pro-active response to issues identified. Introducing "cleaning books" and zonal meetings where senior nurses and estates staff review every ward helps us to monitor ward environments, enabling significant improvements in the fight against healthcare acquired infections. The Trust is rated well nationally for its low rates of infection; however staff constantly work towards further improving these,



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## Today's child, tomorrow's future

chool children are being given an insight into the world of work at our hospitals thanks to a pioneering partnership with Coventry Primary Care Trust, Connexions and the Local Education Authority. As part of the pathfinder project students are offered work experience to encourage them to pursue a career in the NHS.

Other initiatives include visits to local schools to raise awareness of careers in the NHS and children from Walsgrave CE Primary School took part in International Nurses day when they met Maggie Denton and Jacqui Ledsham who went along to talk to the youngsters about the role of nurses and doctors. Maggie Denton said: "We took in a doll to demonstrate Cardio Pulmonary Resuscitation and asked the children to listen to their heart after jumping up and down. We also took in a bacteria machine which showed the children how many

germs were on their hands even after washing them. Everyone thoroughly enjoyed the day."

Training healthcare professionals for the future is extremely important and the Trust has one of the largest and modern healthcare education centres in Europe on the site of the new super hospital in Coventry.

The Centre is home for pioneering medical research by Warwick and Leicester Universities and adds to the Trust's status as a major teaching hospital, actively engaged in undergraduate medical education with its main academic partner the University of Warwick. In addition the Trust is similarly working with the Coventry University on the education of midwives, nurses and allied health professionals.

## University Hospital Opening 5 months to go

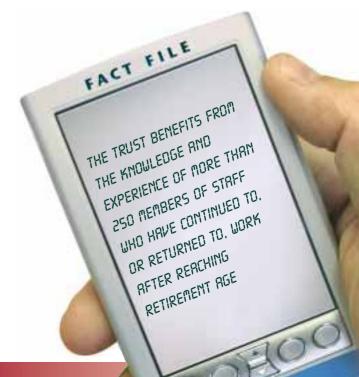
## Right People, Right Place, Right Time

The Trust is one of the fastest growing for staff recruitment with more than 30 new consultants, 300 new nurses and midwives plus many more health professionals starting in the last 12 months. Nearly 7,000 members of staff work in our hospitals and this year has been outstanding with staff receiving national recognition for their contribution to patient care and welfare and for staff training. Top national training awards went to Chris Streather for her exceptional training for support workers. Chris, who has a nursing background had a burning ambition to be a nurse but never dreamed that one day she would have the opportunity to help other people achieve that same ambition. Senior radiographer, Colin Morris, received a prestigious regional radiography award for his commitment to patient care and service improvements. His specialist role enabled him to provide a better service for patients, especially by reducing waiting times for their examinations.

Last but not least, cleaner, Hyacinth Raymond, pictured below, who was nominated for a national magazine's 'Clean Hospital' Award. Reader Joyce Winfield, from Coventry, praised Hyacinth's work saying: "She was the best I have ever seen and I have been in hospital many, many times. She was good at her job and very friendly as well - she was really exceptional."

It is vital that we have the right people, in the right place, at the right time offering the right treatment and, to attract these people the Trust offers flexible working hours and good quality child care facilities. There is help with childcare costs through a childcare voucher scheme and discounts for out-of-school clubs and its commitment was recognised when the Trust was awarded Practice Status under the Government's Improving Working Lives (IWL) initiative. The Trust is now working towards Practice Plus accreditation for IWL.

Flexible retirement, which allows staff to reduce their hours as they approach retiring age or to continue to work after reaching retirement, is another important aspect of IWL and ensures that their knowledge and experience of working in the NHS is not lost. Porter, Ronald Shandley is just one example of our dedicated staff. "I had been retired for 18 months," says the grandfather of eight. "I'd been busy doing my allotment and all the jobs round the house that hadn't got done for the last 20 years, then the hospital rang me up. They said they needed someone to cover and was there any chance I might come back to help them out just for a few hours." It was guite a shock but I thought about it and started to come round to thinking it would give me something to do. When you are retired there's not a lot for you to do. I started to realise it would be better to have something to get up for, somewhere to go, something to give me a bit of purpose."



## MAR 2006

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## **Shaping up for the future**

he development of plans for health services, for the population of Rugby over the next three years, is nearing completion, and include further development of the Hospital of St Cross, supporting many of the aims of the Primary Care Trust and our Hospital Trust, who see the local hospital as a vital component of the plans which include an MRI scanner, more operations, world class specialists and a dedicated rehabilitation centre.

Dr. Mark Newbold, Managing Director of St Cross Hospital, explains: "We gave a public commitment to build on the success of St Cross Hospital and provide the best possible healthcare for local people in a modern local hospital, whilst recognising the constraints which are put upon us by regulations and other quality standards. We cannot provide every service from the hospital, and we cannot turn the clock back, but we want to look at making St Cross a 'Centre of excellence' for many services as well as continuing to expand the number of outpatient clinics, operations, diagnostic tests and rehabilitation services provided from St Cross."

"This means that local people will have most of their hospital care provided locally, only travelling to the new

hospital in Coventry for very specialist operations or other services. Even then our vision would see those patients returning to St Cross for their rehabilitation. Likewise we also want to develop specialist services at St Cross which would give Coventry residents the choice of having their operation at St Cross and then returning back to Coventry for their rehabilitation."

It is an exciting opportunity which will benefit local people and provide some of the UK's best healthcare on their doorstep.

An MRI scanner due to be installed later this year is one example of the developments that are taking place. This will mean that people living in Rugby and surrounding areas who require this specialised form of diagnostic scanning will be able to have this at St Cross. Other developments include a major refurbishment of the Outpatient department and the creation of a Walk In Centre in the hospital. The Walk In Centre is a joint project with Rugby PCT, which is a further step towards bringing community and hospital services closer together for Rugby residents.



### **Our Greatest Asset**

The Trust is committed to ensuring that current and potential employees are not disadvantaged by their ethnic origin, gender, age, sexual orientation or disability. The Trust has robust equality and diversity policies and strategies in place to ensure this is reflected in our practices. This includes a revised and updated race equality scheme.

We are committed to widening employment opportunities for disabled people by ensuring that selection decisions and policies are based on objective criteria and not on unlawful discrimination, prejudice or unfair assumptions, and in retaining staff who become disabled, ensuring that their skills and experience are used to their full potential.

Working in partnership with Remploy Interwork and their Retention Plus Scheme we can provide practical advice in situations where health and disability are seriously affecting a person's ability to continue their job. The Trust retained its Employment Service's 'two ticks' symbol demonstrating that the organisation is an employer which is positive about recruiting and retaining disabled people.

Diabetes nurse specialist Kirpal Marwa, who works at Coventry and Warwickshire Hospital, has received a prestigious award to study health beliefs and cultural awareness among the Muslim community in Pakistan. Kirpal is proactive in the fight against diabetes and has written and produced several videos about the condition and how to cope with it. The videos are aimed at dispelling the many myths held by people about diabetes.

She says: "I felt that I wanted to know more about the cultural, health beliefs and religious events, especially Ramadan and how it impacts on the Muslim diabetic community. Especially as a Sikh, I wanted to ensure that I give quality care and advice. I am so passionate about improving the care I give to the Asian Community, not just locally but nationally as well."

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## **Exceptional Care**

ecognised for its world renowned services, the Trust is continually looking to provide the best possible treatment for the communities living and working in Coventry, Warwickshire and beyond. The appointment of a specialist consultant in Head and Neck cancer proved vital for John Costello aged 62 from Stoke in Coventry. He was the first patient to undergo major surgery for mouth cancer at Walsgrave hospital following the introduction of a new theatre in September 2003. The new theatre allowed the development and expansion of head and neck oncology services. John's operation is one of over 60 reconstructive procedures that have now taken place in this new theatre which can take up to eight hours depending on the complexity of the procedure.

Talking about the operation John said "I was diagnosed with mouth cancer and needed an operation to remove part of my tongue. The staff and the treatment I received were exceptional. I have to go for regular check ups and so far so good, I am very grateful to them."

The service has now grown to include four consultants who work in teams of two and the success of this service means that patients in Coventry and Warwickshire no longer have to travel to hospitals outside of the region for these complex treatments and has culminated recently in approval for the Trust and Birmingham Heartlands to become a joint head and neck cancer centre. This is a fantastic achievement for everyone involved in what will be one of the biggest head and neck cancer centres in the Midlands.

The recent introduction of 'state of the art' laser surgery has produced significant benefits to patients with throat cancer reducing the need for radiotherapy and significantly shortening treatment times. For some patients the use of the laser has helped to avoid the need for laryngectomy and significantly improve the quality of life for these patients.



## Making a difference

rom fundraising to chaperoning patients, our volunteers provide the little things which make life more pleasant for patients, visitors and staff. A great deal of new equipment at the hospitals continues to be provided thanks to the hard work and dedication of the volunteers and their enthusiasm continues to be an example to us all.

New toys and special effects have been purchased using a £600 donation from Walsgrave Hospital's Voluntary service, so that children, who come into Walsgrave hospital's Surgical Day Unit, will find the experience less stressful. The new distractional toys will be used on the ward and special lighting effects will be used in the anaesthetic rooms when the children are waiting to go into theatre.

Barry Woodier, who is training to be a Hospital Play Specialist, says: "This donation has allowed us to purchase these new toys and equipment so that we can normalise play for the children when they come into the Surgical Day Unit at Walsgrave Hospital. More importantly these new items will help to entertain the children during the time they wait for surgery which on occasions can be overnight.

#### Interested in becoming a volunteer?

Could you spare a few hours a week to help make life a bit brighter for patients. Anyone who is aged from 18 upwards, available during the day from 10am – 4pm, Monday – Friday, can be a volunteer. If you are interested please contact 02476 622224, between the hours of 9am - 5pm Monday to Friday or leave a message on the 24 hour answer machine service and your



University Hospital Opening



# MAY 2006

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### So much to live for

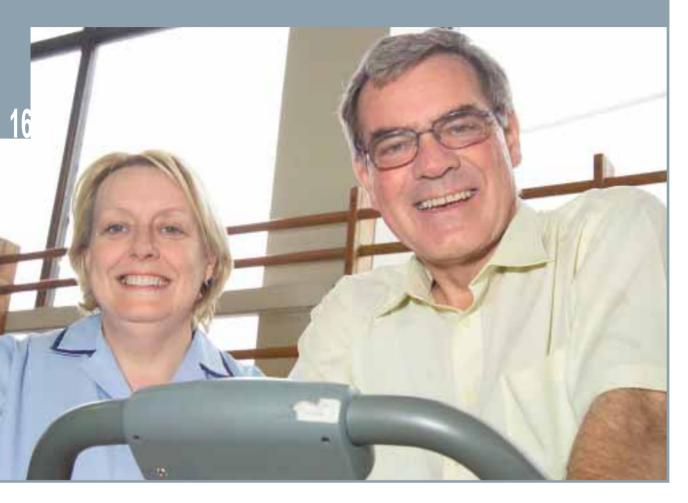
loving son gave his mum one of his kidneys in a life saving operation – and then told her she was going to be a gran. Damion Francis and his mum Margaret were overjoyed at their double dose of fantastic news. Just days after the transplant, as Margaret was making a good recovery, Damion told her his partner was expecting a baby.

Margaret, who needed a kidney donor after years of dialysis treatment, said she couldn't believe how her luck had changed. She said: "It has given me something to aim for. I'm going to be buying things and pushing this baby down the street."

She suffered kidney failure four years ago and had been on dialysis for up to nine hours a day. Damion didn't think twice about giving his mum one of his kidneys when she needed the transplant. Margaret said: "I just want to say thank you very much for giving me a new life."

Margaret was the first Afro-Carribean person in Coventry to undergo a 'living donor' transplant operation.

From April 2004 to March 2005 19 'live donor' and 17 cadaveric kidney transplants were performed at Walsgrave Hospital, one of the leading renal centres in the UK. The Trust and the University of Warwick are also actively involved in research to improve the quality of lives of people with kidney disease, understand how kidney disease may lead to heart attack or stroke, and design strategies to prevent these problems and improve transplantation for those with kidney failure, including the programme to 'Transplant the Untransplantable', which is the largest in the UK.



## **Putting Patients First**

ur staff are committed to putting patients first and are always looking at ways to develop and improve the quality and availability of information for patients and carers. This has resulted in a number of new and improved patient information leaflets and brochures. New Hip and Knee Booklets produced through partnership working with consultants, physiotherapists, nurses and occupational therapists have provided comprehensive

information about the patient's experience from before they attend hospital to what they should do when they return home after the joint replacement. Talking about the booklets, David Riley, who lives in Coventry and who recently had a knee replacement says: "I received a high standard of care throughout the whole experience and the physiotherapists were fantastic. I found the knee booklet particularly helpful. I am waiting for a knee replacement on my other knee now and this information is helping me to prepare for this operation."

Ann Raschke, who works for the PALs department and has worked tirelessly to champion the needs of patients, was given an award by the Rotary Club of Coventry. Ann has been described as 'the patients' champion' in health services in the city. The award was in recognition of her work and dedication in conducting surveys of patients' needs. Ann has worked voluntarily in the field for more than 15 years. She said that she was overwhelmed by the award and that she had received a lot of help from other people.

#### What PALs means.

The Patient Advice and Liaison service (PALs) guides patients, their family and friends through the different services available within the hospital and helps them sort out any concerns they may have about the care they receive. Members of the PALs team are available at the Help Desks in the main entrance of all three hospitals:

- Walsgrave Hospital
   Monday to Friday 9am 5pm
- Coventry and Warwickshire Hospital Monday and Thursday mornings
- Hospital of St Cross, Rugby
   Tuesday and Wednesday mornings
- Or you can telephone
   FREEPHONE 0800 028 4203

# JUN 2006

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### **World Class Facilities**

atients, staff and visitors to Walsgrave Hospital have watched with interest the building work that has been taking place. This has finally come to fruition and has culminated in the opening of the first section of the new super University Hospital, providing some of the best healthcare facilities not just in the UK but across Europe. The University Hospital, one of the UK's biggest hospital complexes, is an excellent example of the future of the NHS and confirmed as 'world class' by Sir Nigel Crisp, Chief Executive of the NHS during a tour of the new hospital.

The new hospital, five storeys high and a quarter of a mile long, consolidates the Walsgrave and Coventry and Warwickshire Hospitals into a single state of the art hospital, with 27 theatres, more than 1,200 beds, many of which will be in single rooms, 4 scanners, more intensive care beds and additional neonatal cots. More than 6,000 staff will be working in the new hospital providing some of the best healthcare the UK can offer.

The University Hospital, built under the private finance initiative, has already opened a new Centre for Reproductive Medicine, Clinical Sciences Building, Mental Health Unit, the Women's Unit in the West Wing of the new hospital and a Crèche.

Sir Nigel Crisp, Chief Executive of the NHS, who had previously toured the new super hospital site, praised the Trust for its hard work for improving performance. Applauding the innovative work he said: "I am impressed not just at the scale of the building but the thought that has gone into how services are going to be delivered. Making the patient the centre of all our designs and services is exactly what we should be doing."

#### **Trust Board**

ed by the Chairman and Chief Executive, the Trust Board is the decision making body for the Trust and comprises Executive Directors who are paid by the Trust for particular roles within the organisation. They are supported by the Non-Executive Directors who are members of the community and who are appointed by the independent NHS Appointments Commission. The primary role of the Trust Board is to:

- Set the strategic direction and key corporate objectives of the Trust
- Monitor the Trust's performance against those objectives
- Be responsive to the local community and accountable to the Secretary of State for the services provided by the Trust
- Ensure that the Trust complies fully with the Codes of Conduct and Accountability for the NHS issued by the Secretary of State for Health in April 1994

As part of the Trust's commitment to openness and accountability, you are invited to attend any public Board meeting.

Please contact 02476 538800 for dates and venues of public Trust Board meetings.



Brvan Stoten Chairman



David Roberts Chief Executive



Martin Lee Medical Director



Alice Casev Chief Operating Officer



Andrew Hardy Director of Finance



Hilary Scholefield Director of Nursing



John Amphlett Director of Corporate Planning



Mark Newbold Managing Director of Director of New Hospital of St Cross



Paul Crofton Hospital Project



Howard Shaw Director of Research & Development



Liz Thiebe Director of New Hospital Service Design



Nick Elliott Director of ICT Services



Tim Sawdon Non-Executive Director



Lady Sonia Hornby Non-Executive Director



Philip Townshend Non-Executive Director



Yvonne Carter Non-Executive Director



Mohammed Sarwar Non-Executive Director



Nicholas Stokes Non-Executive Director



Rita Stewart Associate Non-Executive Director

# JUL 2006





#### A dream come true

control but when she was just 25 years old she had a heart attack on her wedding day. After spending her first week of married life in Walsgrave Hospital she was told that she might never be able to have children because the strain of pregnancy might be too much for her heart. Now, thanks to the care and support of a team at University Hospitals Coventry and Warwickshire she has a baby girl and is thankful to the staff who made her dream of becoming a mother true.

Heart disease is one complication that is associated with diabetes and Toni is only one of the thousands of diabetic women in the country who need to be monitored closely both before and during pregnancy, as the number of young women with diabetes is increasing so rapidly.

A preconception clinic is helping hundreds of women like Toni who need to discuss the implications of having diabetes and becoming pregnant. This is supported by a dedicated clinic which looks after women who either had diabetes prior to becoming pregnant or develop it as a result of pregnancy.

The team are also involved in spreading the message to other healthcare professionals through their involvement with national courses aimed at training other Healthcare professionals at the University of Warwick.

Dr Aresh Anwar, Consultant in Diabetes said: "Toni's outlook is an example to us all. She worked extremely hard to keep her diabetes under control during pregnancy, making regular visits to clinic to ensure that she could be monitored closely. It's fabulous to see her so happy with her new baby."

Diabetic patients living in Coventry and Warwickshire benefit from a comprehensive service which is supported by a team that includes consultants, nurse specialists, dieticians and a specialist podiatrist. The diabetes service has recently gained national recognition for its work with the Asian community. Nurse specialists are helping to break down language barriers with dedicated diabetes workshops at Coventry and Warwickshire Hospital.



### **Delivering high standards**

the Standards for Better Health. These standards describe the level of quality that organisations providing care for NHS patients are expected to meet, and are underpinned by the principles, systems and processes of clinical governance, putting patient experience at the heart of what the NHS does. The standards cover all aspects of the service we provide and will be used to annually assess performance of every NHS Trust. This resulted in the Trust completely revising its strategy for delivering clinical governance and instigated an important new board, the Health Standards Board, to oversee and ensure that the standards of care expected by patients would be delivered by all the Trust's services.

The new standards are grouped into seven areas:

- Safety continuing to develop our clinical risk management systems we have purchased a new monitoring system that enables us to analyse and monitor more closely any clinical accidents that occur, and allows us to report accidents to the National Patient Safety Agency which collates information right across the NHS and this has led to a number of national initiatives to improve safety across the NHS. This has resulted in numerous changes to the way we do things in many areas, including drug administration, patient falls, patient transport, and health records
- Clinical and Cost Effectiveness we have a robust clinical audit programme that ensures we are delivering the most up to date practice

- Governance these standards cover a huge number of areas, and ensure that we have robust financial systems; that we carry out research to high standards; that we appraise, train and develop all of our staff and that we use patient's information in a secure and confidential way
- Patient focus the 2004 inpatient survey showed huge improvements in patients satisfaction over the previous survey. As a result of the improvements, the Trust was invited to a national conference to share our work
- Accessible and Responsive Care the Trust met all of its waiting list targets in 2004/5
- Care Environment and Amenities 2004 saw the move of the first clinical services into the superb facilities of the new hospital, however we continued to ensure the older areas were maintained and particularly important, were clean
- Public Health the Trust worked with local health economy colleagues to co-ordinate the implementation of new drugs and procedures to the NHS locally. The Trust recognises the role it has to play in supporting our local primary care organisations and will be working in partnership to help support the implementation of the standards that relate to public health

# **AUG** 2006

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Artists impression of a specialist health technology park

### A Good Corporate Citizen

egeneration is a top priority for our hospitals and partnership working has embedded the Trust at the heart of community interests in Coventry and Warwickshire, leading to a number of successful initiatives bringing added local value to residents, community organisations and small enterprises. The Trust's innovative approach to regeneration has been used by the Department of Health to test the new 'Good Corporate Citizenship' draft assessment model which will eventually be used by NHS Trusts to self-assess themselves against the Good Corporate Citizenship guidelines.

Working with the Learning and Skills Council we have seen 19 people successfully gaining employment within our hospitals plus the introduction of a Job Centre Plus drop-in centre housed on the site of the new University Hospital provides skills and career advice to existing staff and students.

The Trust has further developed its contribution to regeneration through the engagement of local industries and the diversification of local industries into medical devices and medical technologies innovations. An example is the innovative partnership working between Professor Damian Griffin, an orthopaedic surgeon and Managing Director Jim Grey from MCS Engineering which has led to the production of surgical instruments used in hip operations to free young people from arthritic pain. Jim Grey says: "Three years ago 70 per cent of our work was from the motor industry. Following the collapse of this industry we had to look to other markets and this new approach was the ideal solution to our problems."

With support from the European Commission, Warwickshire County Council, Coventry City Council, Rugby Borough Council and Warwick and Coventry universities are working alongside the Trust on plans for the future which include a specialist health technology park with businesses on site that might include firms making artificial joints and companies specialising in facial surgery. Chief Executive David Roberts said: "It is a very important strategic development for this part of the country, which would be at the heart of the community."



### **Balancing the Books**

he Trust has seen yet another challenging year in 2004/05, but has still maintained its enviable record of achieving a balanced income and expenditure position by generating a surplus of £131,000.

Although this position was reached partly due to the Trust taking the benefit of an exceptional adjustment of £3.6 million to depreciation charges (which is explained in the full set of accounts), the Trust has in fact met each one of the challenging financial performance targets set by the Department of Health for the financial year of 2004/05 as noted below.

NHS Trusts are required to meet four specific targets:

- To achieve an Income & Expenditure balance
- To remain within an External Financing Limit (EFL)
- To achieve a 3.5 per cent return on assets employed
- To remain within the capital resource limit

The summary financial statements set out on pages, 22, 24, 25, 26, and 28 are merely a summary of the information in the full accounts of University Hospitals Coventry and Warwickshire NHS Trust for 2004/05. A full copy of which is available free of charge by contacting the Director of Finance on 02476 538914.

#### Statement of Directors' Responsibilities in respect of the Accounts

The directors are required under the National Health Services Act 1977 to prepare accounts for each financial year. The Secretary of State, with the approval of the Treasury, directs that these accounts give a true and fair view of the state of affairs of the Trust and of the income and expenditure of the Trust for that period. In preparing those accounts, the directors are required to:

 apply on a consistent basis accounting policies laid down by the Secretary of State with the approval of the Treasury

- make judgements and estimates that are reasonable and prudent
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the accounts

The directors are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Trust and to enable them to ensure that the accounts comply with the requirement outlined in the above mentioned direction of the Secretary of State. They are also responsible for safeguarding the assets of the Trust and hence for taking reasonable steps for prevention and detection of fraud and other irregularities.

The directors confirm to the best of their knowledge and belief they have complied with above requirements in preparing the accounts.

By the order of the Board

**David Roberts**Chief Executive
5 September 2005

Andrew Hardy Finance Director 5 September 2005

The Statement of Directors' Responsibility in respect of internal control is printed in full in the 2004/05 Annual Accounts for the Trust. A copy is available by contacting the Director of Finance on 02476 538914.

#### **Remuneration Committee**

The remuneration and terms of service of Executive Directors of the Trust are determined by the Remuneration Committee, which comprises solely of the Chairman and Non-Executive Directors of the Trust. The Committee reviews the salaries of Executive Directors each year and agrees with the Chief Executive at the commencement of the year performance criteria against

which all Executive Directors will be measured. The Trust Board complied with directions on senior managers pay contained in the letter from the Chief Executive of the NHS Trust, dated 11th April 2002. The Chief Executive was the highest paid Director.

The Chief Executive and the Executive Directors are appointed under open competition. An Appointment Panel comprising Non-Executive Directors and external assessors appoints to Director positions. The performance of the Chief Executive is monitored by the Chairman. Executive Directors' performance is monitored by the Chief Executive. The Chief Executive and Executive Directors are subject to the Trust's disciplinary procedure.

#### **Audit Committee**

The Audit Committee members in 2004/05 comprised: Philip Townshend, Mohammed Sarwar, Tim Sawdon, Nicholas Stokes, Yvonne Carter, Lady Sonia Hornby and Rita Stewart.

#### **External Auditors**

The Trust's external auditors are PricewaterhouseCoopers LLP and the total charge for work undertaken in 2004/05 was £286,000 (inclusive of VAT).

During the year, the Trust's external auditors, as part of their Code of Practice work, undertook reviews of data quality and the acute hospitals portfolio, addition to the audit of the Trust's financial statements.

#### **Major Incidents**

The Trust has in place a major incident plan which is fully compliant with 'Handling Major Incidents: An Operational Doctrine' and accompanying NHS guidance on major incident preparedness and planning.

# **SEP** 2006

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## A life changing experience

ebekah Bagguley thought she had the best weeks of her life ahead of her. She'd given up her job, raised thousands of pounds and left her family and friends behind to fulfil her ambition of working in an orphanage in Peru. But within days of arriving, Rebekah was in hospital, fighting for her life, her dreams at an end. An MRI scan revealed that she had a life threatening brain tumour that had been growing above her right eye for two years and she had had no symptoms whatsoever. Her parents went out to Peru to bring Rebekah home and four days later she had a four hour operation at Walsgrave Hospital to remove the tumour.

She says: "As soon as the 'c' word is mentioned you think the worst I had never been ill and there was a lot to get used to and everyone was mindful of this. Neurosurgeon, Mr Saxena, was fantastic. He took time with me and my family to answer all of our questions and made the whole situation less scary. All of the staff were brilliant I couldn't have asked for more with the care that I received. But everything now is back to normal, I am going out with my friends, moving back to Brighton and plan to return to the orphanage in Peru."

The neurosciences unit is one of three major regional centres for the diagnosis, treatment and care of patients with a wide range of neurological and neurosurgical conditions and takes pride in its reputation for delivering high standards of surgical, medical, nursing and critical care to patients across Coventry, Warwickshire and beyond. It is building on its success to meet the ever increasing demands for neuroscience services and major investment has enhanced facilities enabling recruitment of additional clinical staff, accreditation of specialist registrar training and the development of highly skilled specialist nurses.

## **Balancing the Books**

#### Income and Expenditure Account for the year ended 31 March 2005

Income from activities:

Continuing operations

Other operating income:

Continuing operations

Operating expenses:

Continuing operations

#### **OPERATING SURPLUS**

Continuing operations

Profit (loss) on disposal of fixed assets

#### **SURPLUS BEFORE INTEREST**

Interest receivable

Other finance costs

Unwinding of discount

Other finance costs

Change in discount rate on provision

#### SURPLUS FOR THE FINANCIAL YEAR

Public Dividend Capital Dividend payable

#### **RETAINED SURPLUS FOR THE YEAR**

0004/05	0000/04
2004/05	2003/04
£000	£000
276,788	244,407
34,115	27,700
(305,609)	(267,346)
5,294	4,761
(204)	(18)
(204)	(10)
5,090	4,743
380	245
(66)	(78)
` '	` '
0	(34)
5,404	4,876
(5,273)	(4,871)
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131	5

#### Statement of Total Recognised Gains and Losses for the year ended 31 March 2005

	2004/05 £000	2003/04 £000
Surplus for the financial year before dividend payments	5,404	4,876
Fixed Asset Impairment losses	(9,703)	0
Unrealised surplus on fixed asset revaulations/indexation	79,705	11,868
Increases in the donated asset and government grant reserve due to receipt of donated and government grant financed assets	1,046	97
Reductions in the donated asset and government grant reserve due to the depreciation,impairment and disposal	,	
of donated and government grant financed assets	(1,717)	(947)
Total gains and losses recognised for the financial year	74,735	15,894

2003/04

2004/05

## **Balancing the Books**

**Balance Sheet** as at 31 March 2005

**FIXED ASSETS** 

Debtors Investments

**CREDITORS** 

**CURRENT ASSETS** Stocks and work in progress

Cash at bank and in hand

Amounts falling due within one year

**TOTAL ASSETS EMPLOYED** 

Income and expenditure reserve

TOTAL TAXPAYERS' EQUITY

FINANCED BY: TAXPAYERS' EQUITY Public dividend capital Revaluation reserve Donated asset reserve

**NET CURRENT ASSETS (LIABILITIES)** 

TOTAL ASSETS LESS CURRENT LIABILITIES

**PROVISION FOR LIABILITIES & CHARGES** 

2004/05	2003/04
£000	£000
	2000
211,547	151,944
5,985	5,186
20,056	13,109
0	0
1,170	8,985
(26,377)	(29,390)
(20,577)	(23,330)
834	(2,110)
212,381	149,834
(5,004)	(5,612)
(3,004)	(3,012)
207,377	144,222
71,593	77,900
108,817	42,298
7,147	6,029
	·
19,820	17,995
207,377	144,222
	· · · ,===

Cash Flow Statement	
or the year ended 31 March 20	005

£000		£000	£000
151,944	OPERATING ACTIVITIES		
	Net cash inflow from operating activities	23,567	43,268
5,186	RETURNS ON INVESTMENTS & SERVICING OF FINANCE		
13,109	Interest received	380	245
0			
8,985	Net cash inflow from returns on		
	investments and servicing of finance	380	245
(29,390)	CAPITAL EXPENDITURE		
	Payments to acquire tangible fixed assets	(12,366)	(15,171)
(2,110)	Net cash from capital expenditure	(12,366)	(15,171)
149,834	DIVIDENDS PAID	(5,273)	(4,871)
(5,612)	Net cash inflow before management of		
	liquid resources and financing	6,308	23,471
144,222			
	FINANCING		
	Public dividend capital received	34,455	4,000
	Public dividend capital repaid (not previously accrued)	(40,762)	(17,256)
77,900	Public dividend capital repaid (accrued in prior period)	0	(10,534)
42,298			
6,029	Net cash inflow (outflow) from financing	( 6,307)	(23,790)
17,995			
144,222	Increase/(decrease) in cash	1	(319)
	£000  151,944  5,186 13,109 0 8,985  (29,390)  (2,110)  149,834  (5,612)  144,222  77,900 42,298 6,029 17,995	DIVIDENDS PAID  Control of liquid resources and financing  Financing  Public dividend capital received  Public dividend capital repaid (not previously accrued)  Public dividend capital repaid (accrued in prior period)  Tr, 995  Net cash inflow (outflow) from financing  Poperating ACTIVITIES  Net cash inflow from returns on investments and servicing of finance  Capital Expenditure  Payments to acquire tangible fixed assets  Net cash from capital expenditure  Dividends and financing  Public dividend capital received  Public dividend capital repaid (not previously accrued)  Public dividend capital repaid (accrued in prior period)  Net cash inflow (outflow) from financing  Increase/(decrease) in cash	### Company of the co

## **Balancing the Books**

#### **Management Costs**

		4/05 E000	Restated 2003/04 £000
Management costs	10	,259	9,605
Income	310	,903	272,492
Management costs as a percentage of income		3.3%	3.5%

**Better Payment Practice Code Measure of Compliance** 

Total bills paid in the year

Total bills paid within target

Percentage of bills paid within target

2004/05 Number	2004/05 £000	2003/04 £000
70,089	72,720	83,517
62,660	62,340	72,488
89%	86%	87%

The Better Payment Practice Code requires the Trust to aim to pay all valid Non-NHS invoices by the due date or within 30 days of receipt of goods or valid invoice, whichever is later.

#### Independent Auditors' Report to University Hospitals Coventry and Warwickshire NHS Trust on the Summary Financial Statements

We have examined the summary financial statements set out on pages 22, 24, 25, 26 and 28.

This report is made solely to the Board of University Hospitals Coventry and Warwickshire NHS Trust in accordance with Part II of the Audit Commission Act 1988 and for no other purpose, as set out in paragraph 54 of the Statement of Responsibilities of Auditors and Audited Bodies, prepared by the Audit Commission.

#### Respective responsibilities of directors and auditors

The directors are responsible for preparing the Annual Report. Our responsibility is to report to you our opinion on the consistency of the summary financial statements with the statutory financial statements. We also read the other information contained in the Annual Report and consider the implications for our report if we become aware of any misstatements or material inconsistencies with the summary financial statements.

#### **Basis of Opinion**

We conducted our work in accordance with Bulletin 1999/6 'The auditor's statement on the summary financial statements' issued by the Auditing Practices Board for use in the United Kingdom.

#### **Opinion**

In our opinion the summary financial statements are consistent with the statutory financial statements of the Trust for the year ended 31 March 2005 on which we have issued an unqualified opinion.

Prienathuse Coopers Le Date: 12 September 2005

PricewaterhouseCoopers LLP

Cornwall Court 19 Cornwall Street Birmingham

**B3 2DT** 

## Director's Interests – 1 April 2004 – 31 March 2005

Bryan Stoten	Chairman (April 2004-March 2005)	Director PMA (Public Management Associates). Trustee – Heart Save and PMA Foundation Member: – Court of University, Birmingham. NHS Confederation Council. Senior Fellow – Warwick Business School.
		Professor – University of Central England.
Mr Philip Townshend	Non Executive Director – Vice Chairman (April 2004-March 2005)	Directorships – Warwickshire Law Society Ltd Prince's Youth Business Trust Groundwork UK Ltd Coventry and Solihull Waste Disposal Co Ltd Member of Coventry City Council Shadow Cabinet Member for Coventry City Council Services
Lady Sonia Hornby	Non Executive Director (April 2004-March 2005)	Partner – "Health Partnerships". Chairman – Kingwood Trust.
Mr Mohammed Sarwar	Non Executive Director (April 2004-March 2005)	Nil
Prof Yvonne Carter	Non Executive Director (April 2004-March 2005)	Dean, Warwick Medical School, Warwick University Governor of the Health Foundation Member of the Board of the Coventry and Warwickshire Medical Research Fund General Practitioner & Honorary Consultant in Primary Care, CPCT
Mr Tim Sawdon	Non Executive Director (April 2004-March 2005)	Director: Mastgrove Ltd t/a Dollond and Aitchison, T W Sawdon t/a Dollond and Aitchison Member of Coventry City Council.
Mr Nick Stokes	Non Executive Director (April 2004-March 2005)	Employed by Age Concern Enterprises, the commercial arm of Age Concern, as Head of Business Development
Rita Stewart	Associate Non Executive Director (April 2004-March 2005)	Member of steering group - Coventry Society for the Blind. Director – SENSE (The National Deafblind and Rubella Ass).
David Roberts	Chief Executive (April 2004-March 2005)	Visiting Lecturer – Harvard University Visiting Fellow of Warwick University Chairman – Sterling Planning Alliance
Alice Casey	Chief Operating Officer (April 2004-March 2005)	Research Fellow, Keele University. Visiting Fellow of Warwick University Member of Standards Committee of Coventry City Council Member of Employer's Panel of Employment Tribunals for England
Mr Martin Lee	Medical Director (April 2004-March 2005)	Consultant Breast Surgeon Chairman of Education & Training Committee, Association of Breast Surgeons Member of Specialist Advisory Committee in General Surgery
John Smith	Finance Director (April 2004-May 2004)	Nil
Andrew Hardy	Finance Director (June 2004-March 2005)	Nil
Hilary Scholefield	Director of Nursing (April 2004-March 2005)	Associate Fellow, Warwick University Non-Executive Board Member, Healthcare Purchasing Consortium Nurse Advisor to Engaging with Quality, part of the Health Foundation (a charitable organisation)

The remaining Directors recorded a nil return meaning they do not have relevant Directors interests, three of those shown have recorded a nil return.



### Salary and Pension Entitlements of Senior Managers

Name	Title	Salary (bands of £5,000)	Other Remuneration (bands of £5,000)	Benefits in Kind rounded to the nearest £100	Real Increase in pension and related lump sum at age 60 (bands of £2,500)	Total accrued pension and related lump sum at age 60 at 31 March 2005 (bands of £5,000)	Cash Equivalent Transfer Value at 31 March 2005	Cash Equivalent Transfer Value at 31 March 2004	Real Increase in Cash Equivalent Transfer Value	Employers Contribution to Stakeholder Pension To nearest £100
		£000	£000	£	£000	£000	£000	£000	£000	£
David Roberts	Chief Executive	155 - 160	0	2,600	5.0 - 7.5	20 - 25	190	165	21	0
Alice Casey	Director of Human Resources/Chief Operating Officer	125 - 130	0	3,700	5.0 - 7.5	70 - 75	310	272	30	0
Andrew Hardy	Director of Finance (from June 2004)	75 - 80	0	2,200	17.5 - 20.0	60 - 65	154	104	47	0
Bryan Stoten	Chairman	20 - 25	0	0	0	0	0	0	0	0
Hilary Scholefield	Director of Nursing	95 - 100	0	3,600	7.5 - 10.0	115 - 120	344	299	36	0
Howard Shaw	Director of Research & Development	90 - 95	0	0	0	0 - 5	6	0	0	0
John Amphlett	Director of Strategic Partnership and Corporate Development	90 - 95	0	0	7.5 - 10.0	125 - 130	447	393	43	0
John Parkin	Commercial Director (PFI) (April 2004 - December 2005)	90 - 95	0	0	5.0 - 7.5	5 - 10	27	9	17	0
Julie Phelan	Director of Communications	65 - 70	0	2,700	5.0 - 7.5	35 - 40	100	78	20	0
Kenneth Newbold	Head of Clinical Support Division	135 - 140	0	1,000	10 - 12.5	120 - 125	409	351	49	0
Lady Hornby	Non-Executive Director	5 - 10	0	0	0	0	0	0	0	0
Liz Thiebe	Director of New Hospital Service Design	90 - 95	0	3,200	0	0	0	0	0	0
Martin Lee	Medical Director	*	*	*	*	*	*	*	*	0
Mohammed Sarwar	Non-Executive Director	5 - 10	0	0	0	0	0	0	0	0
Nick Elliott	Director of ICT (from September 2004)	45 - 50	0	0	5.0 - 7.5	40 - 45	120	95	23	0
Nick Stokes	Non Executive Director (from April 2004)	5 - 10	0	0	0	0	0	0	0	0
Paul Crofton	New Hospital Project Director (from January 2005)	20 - 25	0	0	0	0 - 5	4	0	0	0
John Smith	Director of Finance (April 2004 - May 2004)	15 - 20	65 - 70	0	**	**	**	**	**	0
Philip Townshend	Non-Executive Director	5 - 10	0	0	0	0	0	0	0	0
Rita Stewart	Non-Executive Director	0 - 5	0	0	0	0	0	0	0	0
Tim Sawdon	Non-Executive Director	5 - 10	0	0	0	0	0	0	0	0
Yvonne Carter	Non-Executive Director	5 - 10	0	0	0	0	0	0	0	0

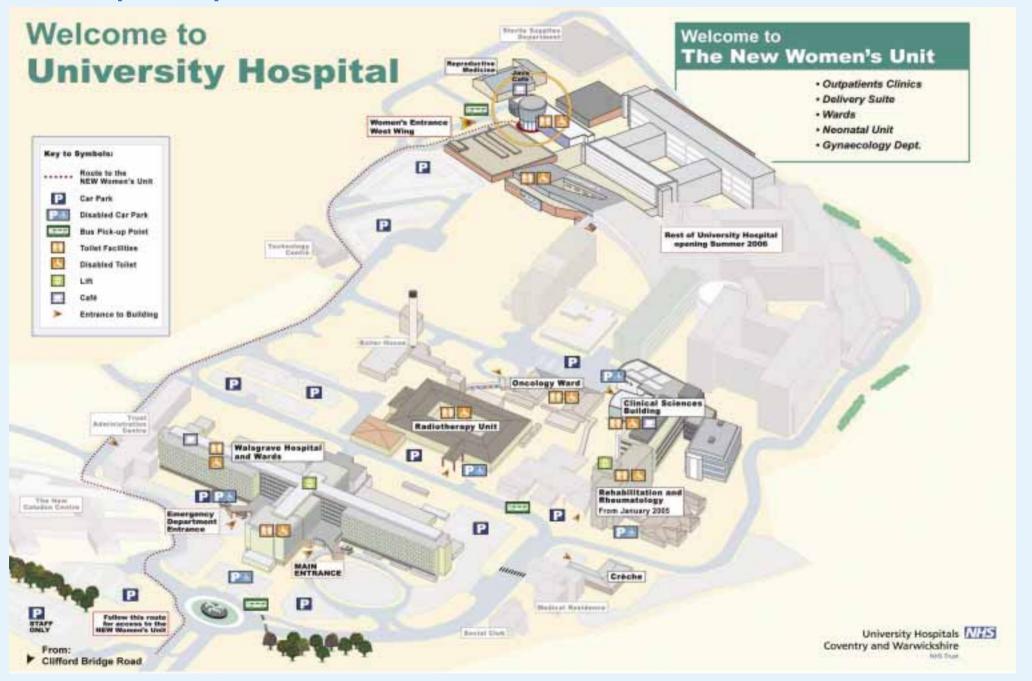
Benefits in kind are in relation to lease cars \* Denotes that the Trust has been unable to obtain approval to disclose personal details and therefore has withheld this information in compliance with the Data Protection Act. \*\* Denotes that the member of staff was not employed by the Trust and pension details are therefore not available.

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 from 2005-06 the other pension details, include the value of any pension benefits in another scheme or arrangement which the individual has transferred to the NHS pension scheme. They also include any additional pension benefits accrued to the member as a result of their purchasing additional years of pension service in the scheme at their own cost. CETVs are calculated within the guidelines and framework prescribed by the Institute and Faculty of Actuaries.

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.

### **New Hospital Map**







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