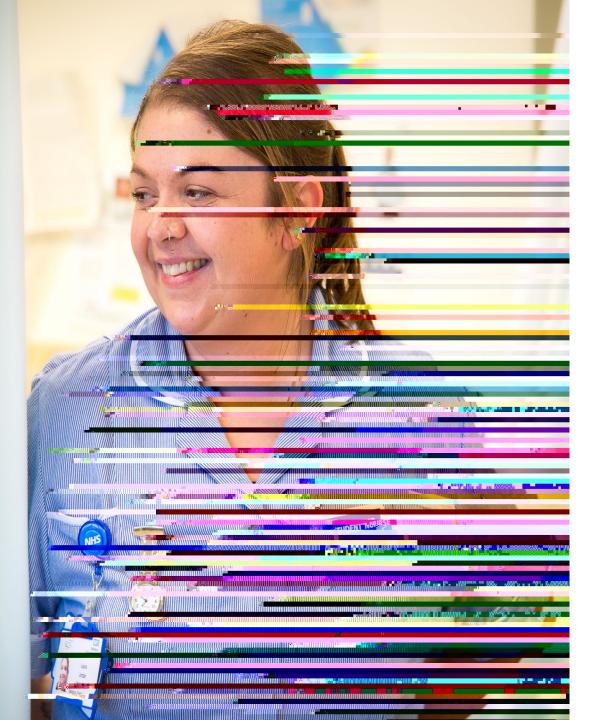


Agenda

- 17:15 Arrival
 Tea and Coffee available
- **18:00 Introduction and welcome** Ian Green, Chair
- 18:10 Annual Report 2022/23 Stacey Hunter, Chief Executive
- **18:30** Annual Accounts and Audit Opinion Mark Ellis, Chief Finance Officer
- **18:40** Clinical Presentation Same Day Emergency Care Dr Stuart Henderson, Consultant Acute Medicine
- 19:00 Council of Governors Report to Members Lucinda Herklots, Deputy Lead Governor
- 19:10 Questions and Answer Session Ian Green, Chair/ Executives
- 19:30 Finish

2022/23 - A look back at last year...

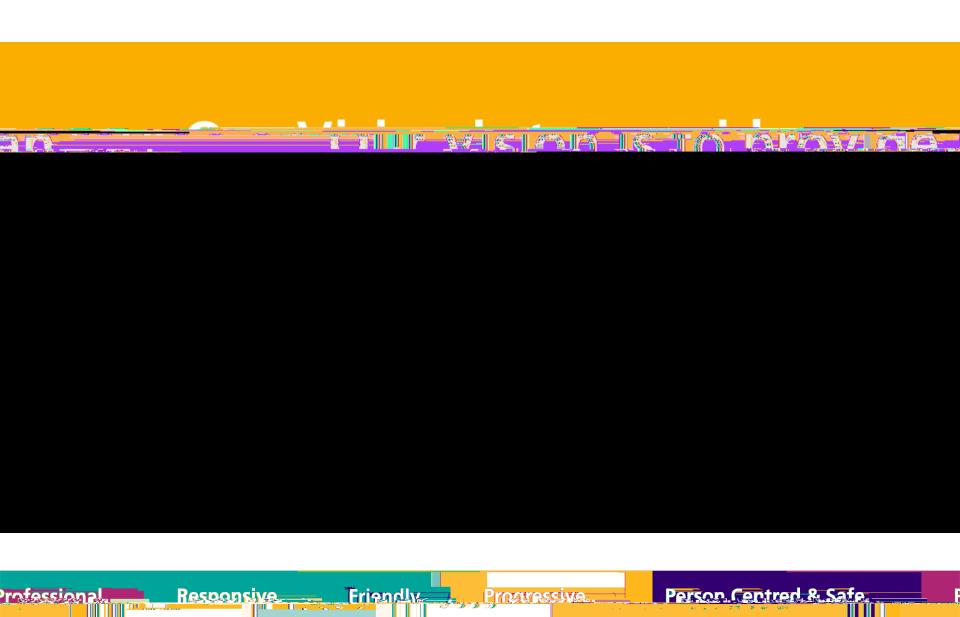
https://youtu.be/F8tYiSw1mwc



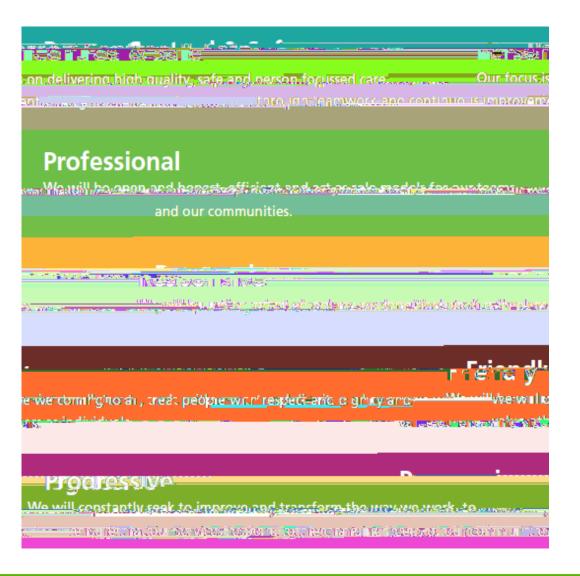
Annual Report 2022/23

Stacey Hunter, Chief Executive

Our Vision



Our Values



In all our work we support, recruit and promote these values to help us achieve our vision.

Our strategy



Our 3 Ps give us direction and focus. We focus on these three core areas so we can achieve our vision over the next 10 years.

Our Performance 2022/23

Our Strate

IMPROVING

IMPROVIN

IMPROVIN

Ten-year vision: To reduce total incidents with moderate or high harm

Top contributor to harm: Falls

Target: To reduce falls to 7 or less per 1,000 bed days

Patient Experience

Patient Experience

Project types:

Supporting service redevelopment — using your experiences/views to help us think about how our services can be improved

Monitoring the quality of our services — for example patient-led audits, suggesting improvements and co-designing actions plans

Serving on committees and working groups — taking an active role as a committee member/chair and providing the patient/visitor/volunteer/carer viewpoint

Patient Safety Partners — involving patients, carers and their families in their own safety, as well as being partners alongside staff to continually improve patient safety in our organisation

Recruitment - taking an active part in the interview process for our staff

Making sure information for patients, carers and families is clear — Development of and/or critical review of written information and surveys. Ensuring these are clear on their purpose, understandable, accessible and are being delivered in the right way.



Supporting our staff

Significant investment has been made, including through the Trust's charity the Stars Appeal, in projects to support staff.

A BIG thank you!

Volunteers

The Trust currently has approx. 350 volunteers. Our volunteers have an important part to play in the overall care provided and contribute by giving additional support in a wide variety of areas.

Stars Appeal

The Stars Appeal is the NHS Charity for the hospital. The Stars Appeal helps hundreds of patients across all wards and departments at Salisbury District Hospital and supports the NHS staff who care for them.

The Haspitell wook

Local community

The community play an important part in delivering hospital services and your engagement and support is greatly appreciated!

The Year in Words – Saili Katebe

https://youtu.be/wUK0K1sVy6A

At a glance

£39k surplus

£7.9m was received from the Elective Recovery Fund as the Trust worked to reduce waiting lists

Spent over £20m on capital on buildings, equipment and digital programmes.

Covid moved to 'business as usual' with additional income reducing to £1.2m to cover testing and vaccination programmes

£227m on pay last year

 Over the last year we have invested more than £20m in SFT.

Looking

The financial and operational challenges being faced by the NHS are well-publicised.

- Challenge of responding to the planned case backlogs created by the pandemic, in the context of ever-increasing pressure on emergency pathways, patient acuity and Industrial action.
- A largely fixed funding settlement being eroded by high levels of inflation.
- Planned breakeven including £20m risk share and working with system partners to address financial sustainability.
- Capital funding remain a significant challenge with aging equipment and estate, alongside a forward-looking digital agenda.

Same Day Emergency Care

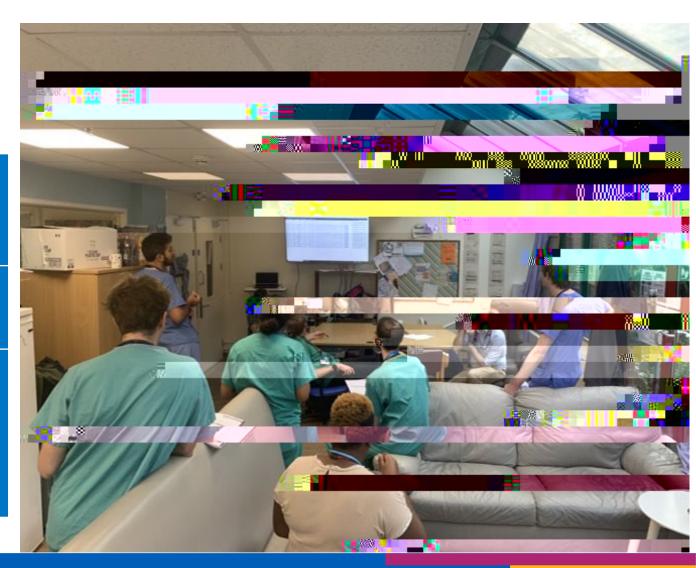
- SDEC is the provision of same day care for emergency patients who would otherwise be admitted to hospital.
- Under this care model, patients presenting at hospital with relevant conditions can be rapidly assessed, diagnosed and treated without being admitted to a ward, and if clinically safe to do so, will go home the same day their care is provided.

Methodology

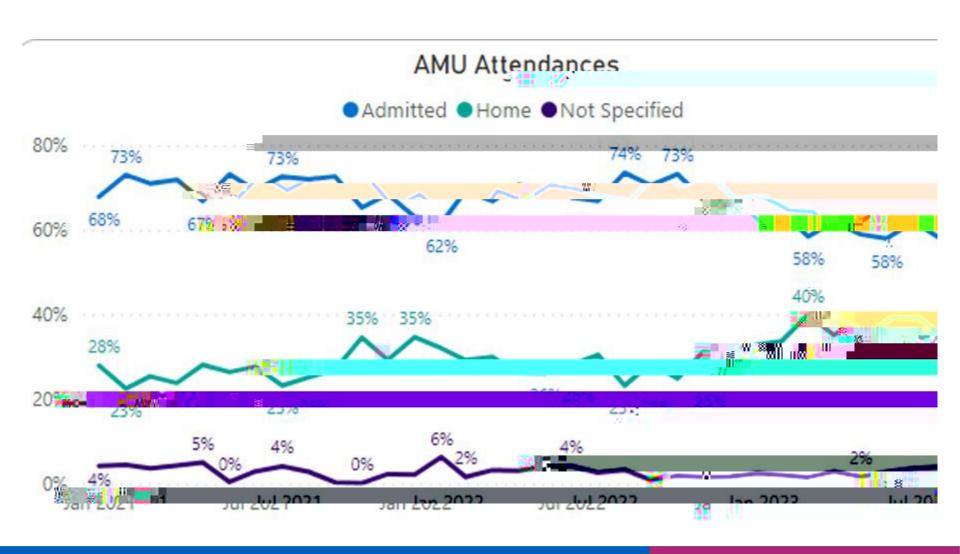
The problem should be clearly defined

Improvement should be data driven

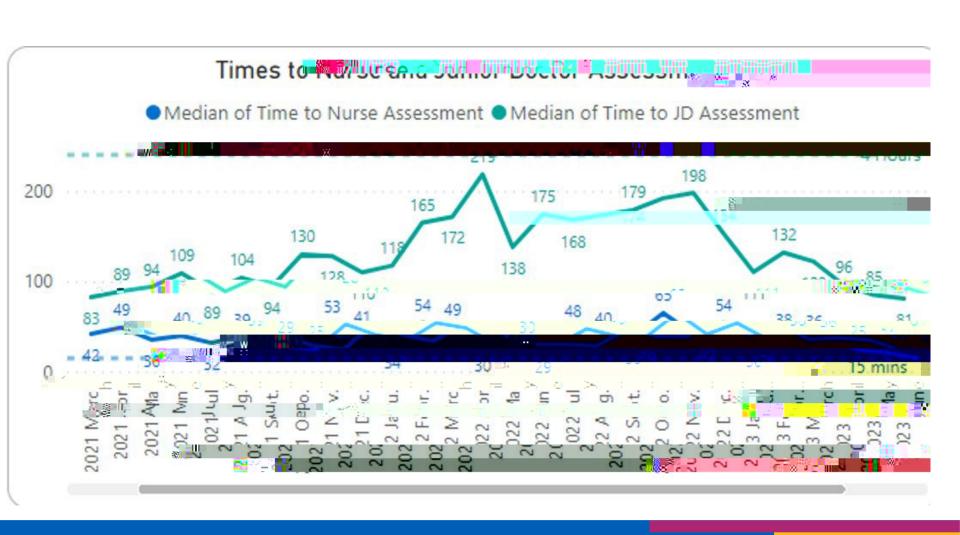
The people who do the work are the ones best-placed to make the improvement



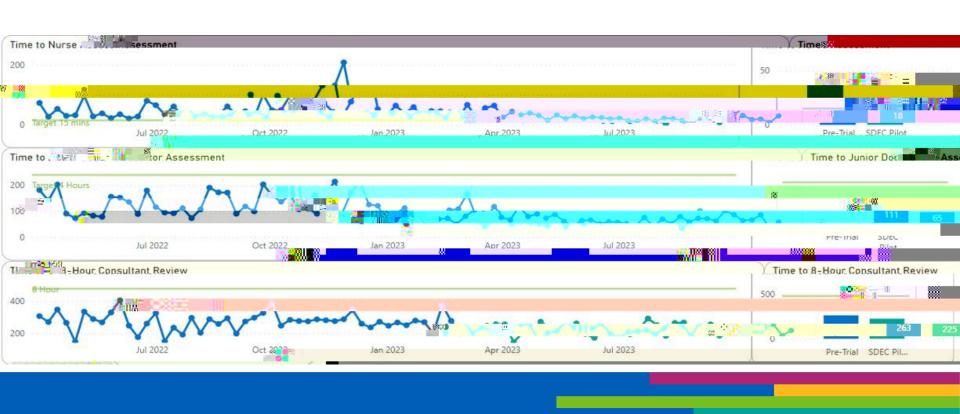
SDEC Performance



Performance

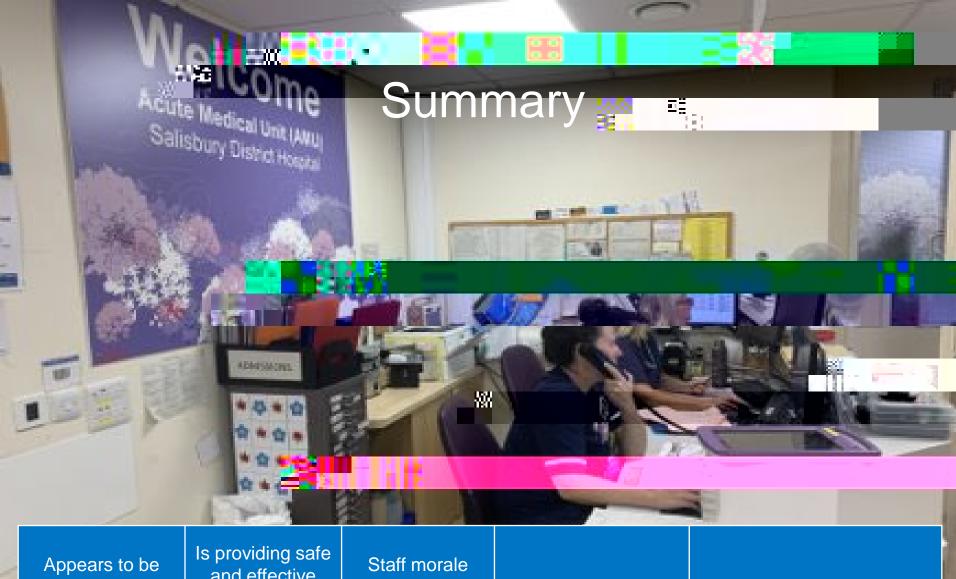


SDEC Performance



Trust Performance





Appears to be working

and effective care

has improved

Q&A Session