Sandwell and West Birmingham Hospitals NHS Trust
Annual Report 2002/03

3 HOSPITALS
3 ★★★★
1 TRUST

SWBH Who’s Who

Produced by the Communications Department, City Hospital, Dudley Road, Birmingham B18 7QH. Tel: 0121 507 5303.
This is the first annual report for the new Trust and it comes at the end of an incredibly successful but difficult year. The complex organisational problems associated with restructure after the merger, coupled with the disastrous fire at Sandwell, could easily have blown us off course. But they didn’t and that is a real credit to the commitment and dedication of our staff.

My non-executive colleagues and I want to express our sincere thanks to everyone. We know how hard staff have worked and the tireless dedication they have shown to ensure our patients, who live in one of the poorest parts of the country, receive some of the best healthcare in Britain. We want to thank the volunteers too. Without their help many of the services and facilities we take for granted simply wouldn’t exist. The future looks incredibly exciting. Major projects that will make the Trust one of the region’s most efficient and respected healthcare providers are about to come on stream. The £30 million Ambulatory Care Centre at City and the £18 million Emergency Services Centre at Sandwell are due to open in 2005. Both will be a real benefit to patients in providing fast, effective and quality healthcare.

As one of the key health providers in the ‘Towards 2010’ project I am looking forward to an even more adventurous year. With so much achieved in so little time I am certain our fledgling Trust is about to make a real impact on the health and well being of our local communities.

The three star award means that over the last year the Trust has met nine key performance targets and some thirty others. Accident and emergency waits have been kept to a minimum, no patients are waiting longer than the target times for appointments, treatment or operations and any cancelled operations have been rescheduled within 28 days. Almost every patient with suspected cancer referred by a GP was seen within two weeks and the Trust met national targets on financial control and hospital cleanliness.

The star ratings system reflects the services that we provide. It is actually measured via some 40 elements which are designed to give a balanced picture, and by the findings of independent inspections by the Commission for Health Improvement.

To achieve the top rating requires us to be doing well in a wide range of areas and not be doing really badly in any others. In other words it is the best assessment that there is of the overall service that we provide to patients.

DID YOU KNOW THAT?

- This Trust is run by the Trust Board, with day to day management of services split into Divisions comprising:
  - Anaesthetics and Critical Care
  - Emergency Care
  - Facilities
  - Medicine A and Medicine B
  - Pathology
  - Surgery A and Surgery B
  - Women and Child Health
  - Information Management and Technology

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Three star status achieved

Nine key performance targets met

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Three star status achieved
**Waiting times on target**

Patients waiting for an operation have benefited from a huge drop in waiting times. Instead of just meeting the Government’s target to reduce the number of people waiting for an operation, we have exceeded it, by ensuring no patients were waiting longer than 12 months for an operation as at the end of March 2003, and only 12 patients were waiting in excess of 9 months.

Our target was to reduce the number of people on the waiting list to 6,314 by March 2003 and due to the hard work of our staff we actually reduced the number of people waiting to 6,251. The Trust is now striving to reduce the number of patients waiting over 6 months in line with national progress to achieve a target of a 3-month maximum wait by 2008. We have also met outpatient waiting times targets by ensuring that no one was waiting more than 21 weeks for a first outpatient appointment as at the end of December 2002. The target for the trust to achieve this year is to ensure no patients are waiting greater than 17 weeks for a first outpatient appointment, whilst ensuring the number of patients waiting between 13 and 17 weeks is also reduced.

**WE WELCOME YOUR VIEWS...**

Compliments or Complaints

We treat complaints very seriously because they are the best way of ensuring our services match up to your expectations wherever possible. During 2002/2003 we received 676 written complaints and 2,592 Thank you letters. We are always striving to improve our efficiency with regard to responding to complaints and this year not only have the number of complaints reduced but we have also increased our response times within 20 working days by over 30%.

**Complaints figures 2002/03**

76.3% responded within 20 working days
0.89% still ongoing
5 requests for Independent Review
0% establishment of a review panel

As a result of the complaints made last year we have made improvements to the system to ensure that actions arising from complaints are identified and implemented. This has included raising awareness, staff counselling, training and supervision and revised policies and procedures.

**Getting involved**

One of the central aims of the NHS Plan was to provide a patient centred service. Patient and Public Involvement (PPI) is at the forefront for radical change in the NHS. Patient and public refers to our patients, users and carers as well as the general public and the community. Involvement is about including them from the first meeting, be it in writing, by telephone or face-to-face, in all aspects of care and service delivery. The Trust appointed a Head of Patient & Public Involvement in January 2003 and the Trust is now working towards promoting PPI across the organisation. So far the Trust has completed two annual National Patient Surveys. We have a successful Patient Advice & Liaison Service and we have strong links with a number of community groups. We are also working in partnership with patients and our communities.

**Our PALS go from strength to strength**

The Patient Advice & Liaison Service (PALS) is there to guide patients, their family and friends through the different services available within the hospital and help patients sort out any concerns they may have about the care they receive. The service has expanded massively during 2002/03 and covers our three hospital sites as well as Primary Care Trusts in Sandwell. The service is available 24 hours - out of hours provided by a section of the ambulance service.

In the past year 620 queries have been raised, ranging from reasons for delay in treatments, difficulty getting appointments, wanting support when attending hospital, difficulty accessing services, plus many others.

**A WARD LIKE NO OTHER**

The Archer Ward at Rowley Regis Hospital is run like no other ward in the Trust. Ward manager, Claudine Billau is a superintendent physiotherapist, and not a nurse. Having a physiotherapist in charge is a bold experiment inspired by Rowley Regis Hospital matron Paula Mascall. She says: “It’s a pilot scheme. I wanted to open the ward to a physiotherapist to see whether an alternative way of caring for the type of patients we have might be more beneficial.” There are two distinct advantages on Archer ward as opposed to a general nursing ward. Staff have plenty of time and most patients have recovered from treatment and are considered fit. They could go home if there were unlimited teams of community support staff to help them with daily tasks like getting out of bed, having a wash and going to the toilet. But, of course, that’s not the case. “What we do here is to help patients realise their potential,” says Claudine Billau. “Our aim is to return someone home with the ability they came into hospital with. The main difference on this ward is that we don’t ‘care’ in the strict nursing sense of doing everything for the patient. We teach them to do things for themselves again.”

**Our top team takes shape**

Some of the key directors and senior clinicians who will be leading the newly formed Sandwell and West Birmingham Hospitals NHS Trust are now in post. This week decisions are being made about appointments at director and deputy director level for the nine clinical divisions. Chief executive John Adler has decided to spend a fortnight in July “walking the floor” to meet as many staff as possible and get a feel for running one of Britain’s largest NHS trusts.
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1st June 2002

MEETING FOR THE FIRST TIME

Members of the new SWBH Trust Board met for the first time today with new chairman Najma Hafeez in the driving seat. The team, who will make major decisions on the Trust’s future strategy, met at a meeting in the Anne Gibson board room at City Hospital.

The board welcomed two new non-executive members: Isobel Buttram, who has a nursing background and was previously Dean of the School of Health at the University of Wolverhampton; and Roger Trotman, who has held senior management positions in a variety of industries and was until his retirement managing director of Tufnol Ltd in Birmingham.

28th July 2002

ARSON ATTACK DESTROYS A&E

Arsonists are believed responsible for a fire which gutted Sandwell Hospital Accident and Emergency department. Two critically ill patients were among scores evacuated to safety. A nurse leapt from a window into the arms of colleagues to escape the choking smoke. Flames ripped through the heart of the building, causing massive structural damage and wiping out the x-ray and radiography department. Emergency patients were being transferred to City Hospital in Birmingham and Walsall Manor.

Skilled nurses expand their roles

The Trust is at the forefront of radical changes in the NHS in terms of expanding roles: we have over 130 Clinical Nurse Specialists and a Nurse Consultant in Critical Care.

Jenny Simpson is a Registered Surgical Nurse at City Hospital and is just one of only a handful of nurse practitioners in the country. In 1996 she was seconded to Oswestry to learn and practise minor surgery. There, she learned to do many of the tasks performed by junior doctors, including how to close wounds using a variety of suturing (stitching) techniques and skin clips, put ventfours in, take bloods, cannulate and give local anaesthetic injections during surgery.

She says: “I attended ward rounds and carried out pre- and post-operative visits on the wards. What I was doing was really outside a nurse’s role, and that’s what is envisaged in much of the way the new Ambulatory Care Centre will operate.”

Back from Oswestry she assisted a consultant for two sessions a week, re-rating tissue, suturing and gradually doing more and more. Now she performs minor operations at City, ‘lumps and bumps’ as she calls them, on her own with a consultant in the next room available for guidance if it’s needed. “Most of my work is still assisting in theatre,” says Jenny. “For example, on Tuesdays I’ll be with the colorectal/breast consultant assisting him, but I also write the lists, help to provide training opportunities for junior staff, request ECGs, blood investigations and X-rays and meet and counsel patients before their operations. As Surgical Assistants the service we give enhances what is provided by doctors. We are permanent members of staff and can give patients continuity of care because we do not have to rotate through different departments like doctors.”

Communication is the key

Almost 7,500 staff work for the Trust and it is vital that they are kept informed. The Trust works closely with the Staff Representative Committee and staff are updated with a regular bi-monthly newsletter. The Trust has a well established email and intranet to enable two way communication and regular Team Brief Sessions with the Chief Executive are welcomed. A running programme entitled Back to the Floor has been very successful. The Chief Executive (seen left on a visit to the catering department at Sandwell) and Non-Executive Directors have been spending time in each division, where they can meet with staff and see for themselves the issues facing frontline and support staff.

The results of the 2002 staff opinion survey were encouraging, with almost 2000 responses. The survey provides a valuable insight into areas where staff are content and also where there may be concerns. Based on the findings, the Trust is producing an action plan to tackle areas where improvements can be made.

Imaging moves on

It wasn’t only the A&E department that was destroyed by the fire. The imaging unit with millions of pounds of x-ray and radiography equipment was reduced to a burnt out shell. Consultant medical physicist Dr Adam Lovick says: “We had spent millions on digital equipment over the previous five years but the fire and smoke damage simply destroyed the lot.” However, in the last year the Trust has spent another £5 million replacing the high-tech equipment with the very latest digital imaging machinery.

The unit is now the best in the West Midlands and one of the most prestigious in Britain. For the 100,000 patients seen here every year x-ray film processing is a thing of the past.

Keeping all the little ones close

Trust staff have use of three Nurseries: two are on site at City and Sandwell Hospitals and the third is close to Rowley Regis Hospital. These facilities for staff are an excellent example of how the Trust is ensuring that staff have access to child care, with the peace of mind that their children are close by. In 2003 the Trust employed two Childcare Co-ordinators. Their roles are to advise staff on all childcare issues, to maintain our current facilities, to develop new initiatives and to review and develop the Trust’s childcare strategy.

On the mend at falls clinic

A special clinic at City Hospital has helped to give patients a new lease of life. Brigid Gavin suffered a series of falls over the last year and she could barely walk, but after 6 weeks at the Falls Clinic, she’s on the road to recovery.

The Falls Clinic is run by Senior Staff Nurse Val Ancillif, who explained: “Patients are first assessed in A&E and if it’s felt they will benefit by attending the clinic they’re sent to us. To start with we give them light exercises to build muscles gently, as many elderly people tend not to do much exercise.”

Val, who has a Diploma in extended exercises for the elderly, runs the clinic every Wednesday. The afternoon session is spent with a physiotherapist, who works on balance and mobility. It seems patients enjoy making new friends as much as the exercises. They return for follow up sessions that include a programme of health education, safety and diet and they get advice on how to keep warm, osteoporosis, continence care and exercises at home.

Brigid Gavin says: “Coming to the clinic has helped enormously. I had lost all confidence in walking but I was frightened of falling but being at the clinic has given me the confidence to walk again. I have really enjoyed meeting people. The staff are very friendly and I’ll be quite sad when its finished.”

Brigid may think it’s all over but it’s not. Once she’s discharged she’ll be referred to a day centre.
Behind the Scenes…

Often the only hospital staff that spring to mind are doctors and nurses and other healthcare professionals but there are equally important staff behind the scenes who keep the cogs turning. These are our excellent facilities staff, of whom there are over 1,000 across the Trust. They look after our estates, hotel services, transport, security and car parking.

4th August 2002

Food Glorious Food

The Trust has three catering departments which have all been recognised for the great advances they have made in the last in the last twelve months.

- Externally audited by the Patient Environment Action Team (PEAT) against the criteria laid down under the Better Hospital Food programme, City Hospital was awarded a score of 30 out of a possible 32 whist Sandwell scored 31 out of 32 for food.
- Improvements made at City over the last 12 months include an in-depth training programme for staff, the publication of the Wards’ Meal Service Protocols and individual patient meal service trays. Other improvements include menus with the provision of fresh fruits, juices and a greater range of the leading chef’s dishes, menu display posters for every ward, menu booklets for every patient’s bedside, between meal snacks of cakes and biscuits, and a snack box for out-of-hours service.

At Sandwell, patients and medical staff have been amended during the last 12 months to include a minimum of three daily leading chefs’ dishes in line with the better hospital food programme. The dishes have been designed by a team of celebrity chefs led by Lloyd Grossman.

FOOD FACTS...

City Hospital
- Catering produce and provide over 1 million meals annually.
- The restaurants and other retail outlets generate over £600,000 of income per year.
- The Trust’s favourite crisp is Walkers plain at 25,000 sold per annum, with cheese & onion a close second at 21,600 sales.

Sandwell Hospital
- Approximately 700 patient meals are produced per day and approx. 500 staff/visitors’ meals per day.
- Patients’ favourite food tends to be traditional roast dinners, home made pies (e.g. steak & kidney) and jam roly polly & steamed sponges for dessert.
- Approximately 108,680 pints of milk and 44,900 loaves are used annually.

Safe and Sound

Last year City Hospital was successful in obtaining a grant from the Home Office Crime Reduction fund for £487k to install CCTV in the car parks and create a new control room. It is anticipated that the new control room will be fully operational from the end of September.

The Car Park Management CCTV control room at Sandwell went 24/7 from the beginning of June and now gives 24-hour external CCTV coverage.

13th September 2002

MINISTER OPENS NEW MATERNITY

Controversial Birmingham MP Clare Short took a break from politics today to open the new look maternity unit at City Hospital. The Secretary of State for International Development, who was born at City Hospital, toured the spacious wards and saw new high dependency beds and a luxury birthing pool. The £500,000 refurbishment is part of a £100 million government scheme to modernise and improve maternity facilities to ensure mums-to-be experience the birth of their baby in modern, pleasant surroundings with a high degree of privacy.

The Gift of Life

With over 5,000 babies born each year, the Maternity Units at City and Sandwell Hospitals have their hands full. Both units have special baby care units and these are where our very tiny babies spend the first few weeks, and sometimes months, of their lives. Our state-of-the-art intensive care and high dependency equipment enables staff to give premature babies the very best care and attention.

Did you know that…..

The Trust has 250 consultants and we appointed 17 new consultants last year.

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The Trust took over the car parking management across all sites during the year because we wanted to use the revenue created to invest in security rather than divert money away from patient care. The Trust is already seeing the benefits with increased security staff at City Hospital, car park attendants at Sandwell, new lighting across all sites, and secure pay on foot parking at Sandwell which will be implemented across the Trust.

Getting the Right deal for Junior Doctors

The Trust has worked hard to meet the national working time target for Junior Doctors of 56 hours per week. We monitor every post every 6 months in order to keep on target. The Trust works to the New Deal set out by the Government in the Junior Doctors’ Working Lives Report to ensure that they receive natural breaks during a full shift. From August 2004, the European Working Time Directive (EWTD) comes into force for junior doctors and rest requirements will be a lot more stringent than in the New Deal. A Trust working group chaired by Medical Director, Dr Hugh Bradley, has been set up to look at implementing the EWTD for doctors in training.
8th October 2002

LORD MAYOR’S ROUNDS

Birmingham’s Lord Mayor came in for a hospital check up today. Councillor Mahmood Hussain and his wife Mukhtar Begum were at City Hospital to check on some of the multi million pound investments in new theatres and equipment. Accompanied by Trust Chairman Najma Hafeez, they saw two new operating theatres, built and installed at a cost of over £2 million. There are now nineteen theatres at City Hospital.

Emma Graham-Clarke

Around seven years ago Emma Graham-Clarke realised that some part of her busy life would have to go. And her job, providing vital pharmaceutical support for Critical Care, Pain Management, A&E and theatres, was top of the list. But after a meeting with her boss the situation was resolved. It was agreed she could work four long days a week, which would give her a day to run her large house and garden but, best of all, a whole weekend for her and her husband Marcus’s competitive hot air balloon

The Sandwell Virtual Healthclub

The Trust has a staff Virtual Healthclub at Sandwell and is also planning to build a new staff gym at City. The gym is available if staff want to lose weight, get fit and healthy or improve their lifestyle. It was set up in 2001 with the aim of helping promote a healthy lifestyle at work and reduce sickness absence. A lot of our staff sit at a desk all day and don’t get any exercise but the gym offers a variety of fitness and health classes. Some are free, while others charge between 50p and £3 per session - a lot less than any of the fashionable local health clubs, and the results are the same if not better.

Improving Working Lives

The Trust is making a huge effort to help staff strike a healthy balance between work and life outside work. The initiative, known as Improving Working Lives (IWL), has been a real benefit to the Trust. Improving the working lives of our staff contributes directly to better patient care because they are being looked after by staff who are motivated and enthusiastic about their work.

Govt health club budget

The Health and Safety Executive have allocated a huge budget in England and Wales for new health clubs, notably for ‘central government’ employees. Such clubs will be offered to us in the very near future. The initiative, known as Improving Working Lives (IWL), has been a real benefit to the Trust. Improving the working lives of our staff contributes directly to better patient care because they are being looked after by staff who are motivated and enthusiastic about their work.

CRITICAL CARE PATIO

When the Critical Care Team at City need a break, they go to a small hideaway on their own doorstep. Their patio garden came after the unit was refurbished four years ago. A patient’s relative donated money to buy a bench and a chair and it just grew from there.

Consultant Nick Sherwood used Critical Care Funds donated to the unit by patients and their relatives to buy some more garden furniture, some plants and pots. The idea for the flowers came during the winter and the Trust’s head gardener gave them a load of plants.

Critical Care is an incredibly tense and a very stressful area and the patio garden is a quiet little corner where staff can snatch a few minutes break to chat and de-stress.

HCA: BALDIP CHAGGAR

A few months ago Baldip Chaggar was getting a terrible pain in her leg. It was a trapped nerve and was beginning to affect her ability to do her job. She was referred to our Occupational Health team and given an appointment straight away to see our physiotherapist. After several weeks of physiotherapy it was suggested she try acupuncture. Although she was skeptical at first, she has been well pleased with the results, and has recommended it to her friends.

The Sandwell Health Club at Sandwell and is also planning to build a new staff gym at City. The gym is available if staff want to lose weight, get fit and healthy or improve their lifestyle. It was set up in 2001 with the aim of helping promote a healthy lifestyle at work and reduce sickness absence. A lot of our staff sit at a desk all day and don’t get any exercise but the gym offers a variety of fitness and health classes. Some are free, while others charge between 50p and £3 per session - a lot less than any of the fashionable local health clubs, and the results are the same if not better.

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A STORY OF INVESTMENT

Around £50 million has been committed to develop two ultra modern health care facilities in Birmingham and West Bromwich. The Ambulatory Care Centre at City and the Emergency Services Centre at Sandwell will streamline treatment for day case and emergency patients, ensuring efficient, high quality care.

Ambulatory care centre

It was once Birmingham’s biggest hole in the ground but now it’s well on the way to being one of the most advanced health facilities in Britain. Construction work on the new £80 million Ambulatory Care Centre (ACC) at City began in December 2002. The first patients are expected in January 2005. They will be walking into an ultra modern health facility with a radical new way of delivering health care.

Clinicians are training now to establish fast track systems in which patients needing treatment for ‘known’ conditions, for example varicose veins, can be seen, diagnosed and in some cases treated and sent home in less than 24 hours.

Day and overnight surgery will be conducted in six theatres with 35 pre and post operative bays with some 90 clinics dedicated to specific symptoms and illness.

Estimates based on figures from City Hospital suggest that ACC staff will deal with 160,000 consultations.

Emergency services centre emerges

The arson attack which destroyed the Accident and Emergency department at Sandwell in July 2002 (see page 7) ranks as one of the worst hospital disasters in the Midlands.

Thankfully no lives were lost and no one seriously injured. The fire also wiped out the x-ray and radiology department.

The old building has now been demolished, the x-ray and radiology department has been rebuilt and construction has begun on a new £18 million Emergency Services Centre. The building work and clinical installations should be completed by winter 2004 with the first patients arriving for treatment in Spring 2005.

It will streamline emergency care in Sandwell. There will be a 20 bedded Emergency Assessment Unit designated for patients who are referred by their GPs, brought in by ambulance or who may have rung NHS Direct and been advised to go to hospital. This will complement a separate modern Accident & Emergency department also located in the centre.

Patients will be seen by either nurses, hospital doctors or GPs in a fast track system that ensures they will be examined, treated and discharged quickly and efficiently.

The Trust has invested a further £19 million since the merger in major clinical and estates projects:

- £450,000 spent on a new Renal Dialysis Unit so patients in our area do not have to travel to the Queen Elizabeth Hospital for treatment.
- £350,000 invested in a high-tech laboratory extension in the Toxicology department.
- £235,000 to establish the biggest Rheumatology/Research Unit outside London.
- £500,000 spent on new CCTV centre to improve security for staff and patients.
- £250,000 investment to modernise the Maternity Unit to ensure mums-to-be experience the birth of their baby in modern, pleasant surroundings.

Sandwell Hospital

- £340,000 to modernise Maternity Unit and improve services for mums-to-be.
- £701,000 for a new state of the art Endoscopy suite.
- £733,000 spent on car park refurbishment and management systems.
- £506,000 to upgrade wards and improve the surroundings for patients.
- £49,250 for a new Surgical day unit.
- £450,000 spent on new CCTV security office.

City Hospital

- £2 million on new twin theatres (Rosie Ross suite) linked to the day surgery unit.
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- £250,000 investment to modernise the Maternity Unit to ensure mums-to-be experience the birth of their baby in modern, pleasant surroundings.
Breast cancer services

The Trust is now recognised as offering some of the most advanced breast care treatment in the country. Women with breast cancer who face a mastectomy can now have the breast removed and reconstructed in the same operation. It is a unique, collaborative process with cancer and plastic surgeons working side by side.

The procedure has been driven by the expectations of women. Fifteen years ago the aim of a breast reconstruction was simply to create a breast mound, something that gave women a cleavage. Now they expect to have a symmetrical pair of breasts that look and behave normally. Giving women a "natural" look is a complex operation that uses the patient’s own body parts to replace cancerous areas of the breast that are removed. Skin from the breast that would previously have been discarded is kept attached. A skin muscle is taken from the back, tunnelled under the armpit, round the side of the chest wall and fed into the breast. A fresh blood supply is connected and the skin envelope sealed. There is even a technique for reshaping the nipple and eventually tattooing the surrounding area to colour match the patient’s skin tone.

Because it is living tissue the reconstructed breast feels warm and matches closely the feel and behaviour of a normal breast. It falls towards the patient when she lies down and, as she ages, it ages with her.

City Hospital surgeons have also pioneered an alternative to using the back muscle. If appropriate, they can replace cancerous parts of the breast with muscle from the patient’s stomach. This year our teams performed 65 reconstruction procedures. Next year they are planning to do around 100.

Internal Verifier, Paulette Bassan

Paulette Bassan is in the final stages of completing a Master’s Degree in Education and Training. She just wants to get better at what she does. As someone involved in encouraging learning and development she feels she should lead by example.

Assistant HR Manager, Kerry Furber

Kerry Furber left school and trained to be a Medical Secretary in 1991. Today she is an Assistant Human Resources Manager at Sandwell. She found that the Trust’s reputation for supporting the training and development needs of its employees was a great help.

She was encouraged to apply for courses that enabled her to enhance her career. Staff have to be prepared to make a personal commitment but Kerry says she found the Trust willing to meet her halfway and once it became clear she was motivated and willing to be flexible, the Trust’s support continued.

Learning and development

The Trust is aiming to become a centre of excellence by developing a learning academy and increasing the use of Information Technology. The NHS has ambitious plans but they can’t be delivered without a skilled workforce and updating staff received NVQs and City and Guilds certificates at this year’s Learning and Development Awards. Others were congratulated for completing Business Administration and Customer Care courses.

Internal Verifier, Paulette Bassan

Paulette Bassan is in the final stages of completing a Master’s Degree in Education and Training. She just wants to get better at what she does. As someone involved in encouraging learning and development she feels she should lead by example.

Assistant HR Manager, Kerry Furber

Kerry Furber left school and trained to be a Medical Secretary in 1991. Today she is an Assistant Human Resources Manager at Sandwell. She found that the Trust’s reputation for supporting the training and development needs of its employees was a great help.

She was encouraged to apply for courses that enabled her to enhance her career. Staff have to be prepared to make a personal commitment but Kerry says she found the Trust willing to meet her halfway and once it became clear she was motivated and willing to be flexible, the Trust’s support continued.

Promoting equal opportunities

We recognise that high performance through the development of people is essential in delivering high quality care. To achieve this, the Trust is committed to providing equal access in the recruitment, selection, promotion and training of staff and to eliminating discrimination and harassment on grounds of gender, disability, marital status, creed, colour, race, ethnic group, sexual orientation, age or religion.
**In Memory of Rosie**

Two new operating theatres at City have been named after a young woman who died at the hospital after a horrific knife attack. 16 year old Rosie Ross was fatally stabbed as she sunbathed in Birmingham City Centre last summer.

Her family (pictured right) raised over £40,000 to buy equipment for the A&E department that fought to save their daughter’s life. Now the new £2.5 million twin operating theatres are to be called the Rosie Ross Suite in memory of the exceptional young woman who made such an impact on everyone who knew her.

**The Story of Sadie Whitehurst**

Two years ago Sadie Whitehurst was crippled with rheumatoid arthritis. She couldn’t wash herself, feed herself or brush her teeth. She had to give up her job and as her condition deteriorated she had to use a wheelchair.

Today the wheelchair is gathering dust in Sadie’s home in Oldbury, replaced by a car. Sadie can now drive herself to City Hospital for her appointments in the Rheumatology Department. Her life has been transformed by one of the new TNF drugs that suppresses inflammation and decreases the chances of the disease doing further damage to the joints. It’s called Infliximab and after suffering for more than 20 years Sadie Buckley believes it’s a miracle.

Professor Chris Buckley believes it’s a great time to be a Rheumatologist. There was a time when the best they could do was give patients a pill for their pain.

Now much to their delight they can administer drugs that really work. Infliximab costs around £8,000 per patient per year but the department is running trials with a core group of patients which, if successful, will cut the cost of TNF type drugs to around £3,000 a year.

**Digital hearing aid**

79 year Margaret Fox became the first patient to be fitted with a new digital hearing aid at City’s Hearing Services Centre. On previous appointments she had a hearing test and a wax impression was made of her inner ear.

At the fitting she had two fine wire hooks looped over her ears, each supporting tiny microphones that slot into her ear canal with wires trailing into a computer. A machine emitted a series of hissing noises at different volumes.

With the hearing aid switched off the computer programme recorded how well the sounds were picked up in Margaret’s inner ear. The results were plotted on a graph and then the whole process repeated with the hearing aid switched on. The two readings were compared and the digital hearing aid tuned to give Margaret the best possible hearing across a range of frequencies.

The old analogue systems were very basic and couldn’t be fine-tuned. The Centre used to have a range of twenty five hearing aids but now has only the one, which can be tuned to suit a huge range of hearing loss.

While the department’s thirty two new computers were being installed, staff had to learn to use the new system at the same time diagnosing and treating patients on the old one.

**Cleaning up on awards**

Our domestic staff have cleaned up in the awards department. Some 200 domestic staff at City have been awarded Level 1 NVQs in Cleaning Science. It means they’re now trained to a recognised national standard in all aspects of their work.

Ninety five per cent of staff in this department have achieved Level 1 NVQ and they have all made a significant contribution in achieving the top ‘green status’ for the Patient Environment Department and its entire top floor of the new £250,000 centre, which cares for 13,500 patients a year. There are six consultants and three academics in the department and its specialist clinics treat patients from as far away as London and Milton Keynes.

**Infleximab success**

Heart attack patients in Sandwell and West Birmingham, an area with one of the highest disease levels in the country, are now benefiting from some of the most rapid treatment times in the NHS.

Figures published recently, known as the ‘door to needle time’, by the Royal College of Physicians put City and Sandwell among the top hospitals for fast response treatment to heart attacks. The survey was conducted over twelve months from April 2002 to March 2003.

Both hospitals exceeded the Government target requiring 75% of heart attack patients to be treated within 30 minutes. Nearly eighty per cent were diagnosed and given a clot busting injection of drugs (Thrombolysis) within 30 minutes of arriving at the hospitals.

**Rheumatology Centre**

In September the Trust opened one of the biggest Rheumatology departments outside London. Previously, patients had to be seen, diagnosed and treated in different areas of City Hospital. But now a dedicated Rheumatology centre occupies the entire top floor of the Maternity block and the Arthritis Research Council Chair of Rheumatology, Professor Chris Buckley, is based at the new £250,000 centre, which cares for 13,500 patients a year. There are six consultants and three academics in the department and its specialist clinics treat patients from as far away as London and Milton Keynes.

While the department’s thirty two new computers were being installed, staff had to learn to use the new system while at the same time diagnosing and treating patients on the old one.

**Good grub and spotless**

Patients at all three of our hospitals get some of the best food in some of the cleanest hospitals in Britain. In a national patient environment action team (PEAT) survey they were all awarded the top ‘green’ rating for food and cleanliness. The Trust has shown continuous improvement for cleanliness and food standards over the past two years.

Director of facilities Graham Seagers says: “Our domestic staff have worked incredibly hard to ensure patients are served high quality meals on clean wards. I want to thank them for their dedication and commitment. They are helping to make a patient’s stay in hospital much more pleasurable.”
New schemes to enhance standards of care for patients

The Trust has secured funding to support service developments, as well as an £18 million funding for a capital investment programme for the 2003/04 financial year. Here are just some of the proposed schemes that will enhance our existing high standards of patient care:

### City Hospital
- New ward block
- A&E consultants and additional staffing in main departments and the Eye Centre
- Re-equip the catheter laboratory
- DVT nurses
- New decontamination equipment in HSSU
- Hospital lounge
- Staff gymnasium
- New stroke unit on D11

### Sandwell Hospital
- Development of Critical Care
- Consultant dermatologist (cross/site)
- New decontamination equipment in HSSU
- Ward improvements and additional beds
- Consultant Obstetrician
- DVT nurses
- Staff fitness centre

### Universal newborn hearing screening

In January 2004 the Trust’s Audiology Department will be at the centre of a major local initiative to test the hearing of every new born baby within 24 hours of birth. It will be the biggest scheme of its kind in England and Wales. The team will be responsible for some 21,000 births a year at City, Sandwell, The Women’s, Good Hope, Heartlands and Solihull Hospitals. We will be recruiting 25 part time staff to do the work. The scheme has been funded by the Department of Health as part of the national Screening Committee’s priority development.

### Workload set to increase

Our budget for the 2003/04 financial year is £248,100,000.

### Planned activity for 2003/04:
- Elective (non-emergency): 16,467
- Emergency: 45,103
- Total in-patients: 61,750
- Day cases: 38,787
- Total out-patients: 459,700
- Births: 5,426
- Accident & Emergency (inc: Eye Hospital): 183,480

Total: 810,893

The financial year 2002/03 saw an excellent performance by the Trust. Sandwell and West Birmingham Hospitals NHS Trust met each of the ambitious performance targets set for it by the NHS Executive and Primary Care Trusts (PCTs). NHS Trusts are required to meet four specific targets:

- To achieve an income and expenditure balance
- To remain within an external financing limit (EFL)
- To achieve a 6% return on assets employed
- To maintain capital spending within a capital resource limit (CRL).

For 2002/03 we recorded an income and expenditure budget surplus of £5,000. We achieved a rate of return on assets of 6% and we also ended the year well within our EFL target for cash spending and CRL target for capital.

In summary 2002/03 reflected an excellent overall financial position.

### Summary of Accounts for 2002/03

<table>
<thead>
<tr>
<th>Balance Sheet for the Year ended 31st March 2003</th>
<th>2002/03</th>
<th>1 April 2002</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed assets</td>
<td>£184,969</td>
<td>£157,903</td>
</tr>
<tr>
<td>Current assets</td>
<td>2825</td>
<td>3,144</td>
</tr>
<tr>
<td>Stocks and work in progress</td>
<td>25,478</td>
<td>19,045</td>
</tr>
<tr>
<td>Debors</td>
<td>925</td>
<td>219</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total current assets</td>
<td>29,228</td>
<td>27,408</td>
</tr>
<tr>
<td>Creditors: Amounts falling due within one year</td>
<td>(34,996)</td>
<td>(24,603)</td>
</tr>
<tr>
<td>Net current assets(liabilities)</td>
<td>(5,768)</td>
<td>(2,195)</td>
</tr>
<tr>
<td>Total assets less current liabilities</td>
<td>179,201</td>
<td>155,708</td>
</tr>
<tr>
<td>Creditors: amounts falling due after more than one year</td>
<td>0</td>
<td>(5)</td>
</tr>
<tr>
<td>Provisions for liabilities and charges</td>
<td>(2,909)</td>
<td>(4,475)</td>
</tr>
<tr>
<td>Total assets employed</td>
<td>176,292</td>
<td>151,228</td>
</tr>
<tr>
<td>Financed by: capital and reserves</td>
<td>152,903</td>
<td>149,352</td>
</tr>
<tr>
<td>Public dividend capital</td>
<td>20,285</td>
<td>0</td>
</tr>
<tr>
<td>Resolution reserve</td>
<td>2,511</td>
<td>2,627</td>
</tr>
<tr>
<td>Donation reserve</td>
<td>735</td>
<td>0</td>
</tr>
<tr>
<td>Government Grant reserve</td>
<td>(550)</td>
<td>0</td>
</tr>
<tr>
<td>Other reserves</td>
<td>308</td>
<td>(751)</td>
</tr>
<tr>
<td>Income and expenditure reserves</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total capital and reserves</td>
<td>176,292</td>
<td>151,228</td>
</tr>
</tbody>
</table>

### Summary of Performance since the Trust was formed

<table>
<thead>
<tr>
<th>Summary of Performance since the Trust was formed</th>
<th>2002/03</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total income</td>
<td>351,249</td>
<td></td>
</tr>
<tr>
<td>Surplus(deficit)</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>
Cash Flow Statement for the Year ended 31st March 2003

<table>
<thead>
<tr>
<th>Operating activities</th>
<th>2002/03</th>
<th>£000</th>
<th>£000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net cash flow from operating activities</td>
<td>22,117</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Returns on investments &amp; servicing of finance:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest received</td>
<td>260</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest paid</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net cash inflow/(outflow) from returns on investments and servicing of finance</td>
<td>260</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Expenditure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments to acquire tangible fixed assets</td>
<td>(20,191)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receipts from sale of tangible fixed assets</td>
<td>9,608</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Payments to acquire)/receipts from sale of intangible assets</td>
<td>(87)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net cash inflow/(outflow) from capital expenditure</td>
<td>(10,048)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dividends paid</td>
<td>(10,670)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net cash inflow/(outflow) before financing</td>
<td>1,659</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net cash inflow/(outflow) from financing</td>
<td>(952)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increase in cash</td>
<td>706</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Statement of Total Recognised Gains and Losses

<table>
<thead>
<tr>
<th>2002/03</th>
<th>£000</th>
<th>£000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surplus for the financial year before dividend payments</td>
<td>9,572</td>
<td></td>
</tr>
<tr>
<td>Unrealised surplus on fixed asset revaluations/indexation</td>
<td>21,604</td>
<td></td>
</tr>
<tr>
<td>Increase in the donation reserve due to receipt of donated assets</td>
<td>832</td>
<td></td>
</tr>
<tr>
<td>Reduction in donation reserve due to depreciation, impairment and/or disposal of donated assets</td>
<td>(378)</td>
<td></td>
</tr>
<tr>
<td>Additions/(reductions) in “other reserves”</td>
<td>(550)</td>
<td></td>
</tr>
<tr>
<td>Total gains recognised in the financial year</td>
<td>31,080</td>
<td></td>
</tr>
<tr>
<td>Prior period adjustment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-95 early retirement</td>
<td>(751)</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Total gains and losses recognised in the financial year</td>
<td>30,329</td>
<td></td>
</tr>
</tbody>
</table>

Remuneration Committee

The Remuneration Committee members in 2002/03 comprised all the Non Executive Directors and Chairman of the Trust. One of the roles of the Remuneration Committee is to determine the various elements of membership for members of the Board. The performance of the Chief Executive is monitored by the Chairman. Executive Directors’ performance is monitored by the Chief Executive. Performance is taken into account in the review of salaries, however performance related pay is not applicable to directors.

The Chief Executive and Executive Directors are appointed under open competition. An appointment panel comprising Non Executive Directors and external assessors appoint to director positions. All Directors are subject to the Trust’s disciplinary procedures.

Audit Committee

The Audit Committee Members in 2002/03 comprised all our Non Executive Directors, Mr Richard Griffiths (Chairman), Mr Roger Trotman, Ms Isabel Bartram, Professor Alisdair Geddes and Mr Chris Trotman also became a member on his appointment in April 2003.

Public Sector Payment

The NHS Target is to pay suppliers within 30 days of receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed. The Trust’s performance in 2002/2003 was as follows.

<table>
<thead>
<tr>
<th>2002/03</th>
<th>£000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total bills paid</td>
<td>87,832</td>
</tr>
<tr>
<td>Total bills paid within target</td>
<td>69,196</td>
</tr>
<tr>
<td>% bills paid within target</td>
<td>79%</td>
</tr>
</tbody>
</table>

Independent Auditors’ Report to the Directors of Sandwell and West Birmingham Hospitals NHS Trust on the Summary Financial Statements

In our opinion the summary financial statements are consistent with the statutory financial statements of the Trust for the year ended 31 March 2003 on which we have issued an unqualified opinion.

Statement of Directors’ Responsibility in Respect of Internal Control

The Board is accountable for internal control. As Accountable Officer I have also the responsibility for reviewing the effectiveness of the system of internal control.

Salary and Pension Entitlements of Voting Board Members

Directors’ Interests

Ms Najma Hafeez – Director of Russell Associates
Mr Roger Trotman – Non Executive Director of Stephens Goslett Ltd, Non Executive Director of S J Fessey and Company Ltd, Non Executive Director of Tufcil Industries Trustees Ltd, Company Secretary of MVT Technology Ltd, Freelance Management Consultant, Member of the Management Board of the Birmingham Employers Federation in the West Midlands, and Member of West Midlands Regional Assembly.

Dr Hugh Bradby – Limited private practice work, predominantly at Priory Hospital, Birmingham.
Mr Martin Lee – Director of British Journal of Surgery Society Ltd, Director of Association of Surgeons of Great Britain and Ireland, Director of Postel Ltd, Honorary Editorial Secretary, Association of Surgeons of Great Britain and Ireland and Member of the Council, British Journal of Surgery.
Mr Colin Muirhead – External Moderator for Sandwell College, HQS Surveyor
Christos Tsoumellis – Director of Phoenix Consulting, Member of the Minority Ethnic Group Council.

We have examined the summary financial statements set out on pages 17 to 19. This report is made solely to the Board of Sandwell and West Birmingham Hospitals NHS Trust in accordance with Part II of the Audit Commission Act 1998 and for no other purpose, as set out in paragraph 54 of the Statement of Responsibilities of Auditors and of 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 on the basis for 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 became aware of any statements or material inconsistencies with the summary financial statements.

Bank of opinion

We conducted our work in accordance with Bulletin 1994/6 ‘The auditor’s statement on the summary financial statements’ issued by the Auditing Practices Board for use in the United Kingdom.

PrizewhitehouseCoopers LLP
Cornwall Court
19 Cornwall Street
Birmingham B3 1DT

In our opinion the summary financial statements are consistent with the statutory financial statements of the Trust for the year ended 31 March 2003 on which we have issued an unqualified opinion.

Signature: John Adler, Chief Executive (on behalf of the board)
Date: September 2003

Name and Title | Age | (bands of £5000) | Other Remuneration (bands of £5000) | Benefits in Kind | Real increase in pension at age 60 (bands of £5000) | Total accrued pension at age 60 (bands of £5000)
--- | --- | --- | --- | --- | --- | ---
N Hafeez | Chairman | 70-74 | 20-25 | 0 | 0 | 0
I Bartram | Non Executive Director | 60 | 0-5 | 0 | 0 | 0
R Griffiths | Non Executive Director | 65 | 0-5 | 0 | 0 | 0
Prof A Geddes CBE | Non Executive Director | 69 | 0-5 | 0 | 0 | 0
R Trotman | Non Executive Director | 65 | 0-5 | 0 | 0 | 0
Voting Board Executive Directors

J Adler | Director of Finance and Performance Management | 41 | 75-80 | 0 | 22 | 5-7.5 | 10-15
P Asinder | Deputy Chief Executive | 44 | 100-105 | 0 | 0 | 2.5-5.5 | 20-25
L Read | Director of Development | 48 | 80-85 | 0 | 0 | 0.25-5 | 10-15
P Warbham CBE | Director of Planning | 50 | 75-80 | 37 | 5 | 0.25-5 | 15-20
H Bradley | Medical Director | 55 | 15-20 | 95-100 | 0 | 5-7.5 | 30-35
M Lee | Medical Director | 53 | 15-20 | 95-100 | 0 | 0.25-5 | 35-40
Non-Voting Board Members

C Holden | Director of Human Resources | 53 | 75-80 | 0 | 45 | 5-7.5 | 15-20
G Seager | Director of Facilities | 41 | 40-45 | 0 | 0 | 0.25-5 | 5-10
T Shackle | Director of MIS | 38 | 75-80 | 0 | 0 | 0.25-5 | 10-15
J Dunn | Director of Operations | 39 | 30-35 | 0 | 0 | 0.25-5 | 5-10
K Dhami | Director of Governance | 33 | 30-35 | 0 | 0 | 0.25-5 | 5-10

Full details of the salary and pension entitlements for Senior Managers can be found in the full Annual Accounts, as well as Directors’ remuneration, in full accordance with Government requirements. There were no golden helix/compensation for loss of office payments or other remuneration. Please note that the list does not include all staff in post this year.