



University Hospitals
Bristol and Weston
NHS Foundation Trust

Becoming University Hospitals Bristol and Weston

Our integration journey and final assurance report

January 2023

#TeamUHBW


We are
supportive
We're always
there for
each other.



We are
respectful
We always
look for the
best in people.



We are
innovative
We're full of
bright ideas.



We are
collaborative
We do things
together.



Foreword

University Hospitals Bristol and Weston NHS Foundation Trust (UHBW) came into being on 1 April 2020, just as the country faced the unprecedented impact of the coronavirus pandemic. The plans we had for starting our journey of integration and improvement had to be adapted and, in some cases, put on hold. While this wasn't the ideal start to our new Trust, we are proud that our teams across Bristol and Weston worked together to use the larger scale of our organisation to protect the safety and resilience of services as much as possible.

The main driver for the creation of UHBW was the opportunity to deliver sustainable patient benefits through improvements in patient safety, clinical quality and outcomes as well as improvements in the experience of patients, carers, and our staff. Uniting the trusts increased our diversity and capacity and has given us a unique opportunity to bring together the things that make the Weston and Bristol hospitals great. We have made some good progress towards achieving our integration goals, but we know that we have more to do.

Maintaining a strong Trust leadership team, with a focus on creating a common purpose for the new organisation was at the heart of our approach. The positive partnerships and relationships between organisations working in North Somerset over many years prior to the merger created a solid basis upon which to build our new Trust and further develop plans for the future.

One of the key milestones in our integration journey was developing our new shared Trust values. More than 5,000 members of staff were part of the process which helped to choose our values which are: Supportive, Respectful, Innovative, Collaborative. We strive to ensure these values truly reflect who we are as an organisation and how we go about our daily work as individuals and teams at UHBW.

Almost three years on, it is encouraging to see that delivery of the benefits of becoming one UHBW is well underway. Developing and valuing our workforce continues to be at the centre of assuring Weston General as a sustainable hospital, and major improvements are already evident in the recruitment and retention of a number of key professional groups, particularly in nursing staff and middle grade doctors. We have also significantly improved access to learning and development and increased apprenticeship opportunities, with 7.5% of staff at Weston General Hospital now undertaking apprenticeships and, despite the significant levels of change, staff engagement has increased.

Significant progress has been made consolidating systems, processes, and policies in support services, such as Digital, Estates, Finance, HR, and Workforce. We have also invested in upgrading the estate at Weston General Hospital and continue to do so.

We know that across the organisation staff have worked collaboratively to develop single services that build on the strengths of the past. Capacity for elective surgery has been expanded in the new Knightstone ward at Weston General and a Medical Day unit, Discharge Lounge and Same Day Emergency Centre have been developed to improve flow through the hospital. Our award-winning Geriatric Emergency Medicine Service (GEMS) team at Weston General have also continued to innovate, recently starting a GEMS at Home service. Sharing the learning across UHBW is key to how we will keep improving our services and supporting our people to be the best they can be every day.

Designing and embedding governance and leadership structures has been a key aspect of establishing UHBW. We know this needed significant effort and support from staff and we thank them for ensuring we now have an organisational structure that sets the foundations for further benefits to be secured for patients and local people. Key to this is the delivery of the Healthy Weston vision, which aims to secure Weston General Hospital as a thriving and sustainable hospital at the heart of the Weston community, providing more of the services local people of all ages need and use most. Our focus will be on working with the Bristol, North Somerset and South Gloucestershire (BNSSG) Integrated Care Partnership to make this vision a reality and we are excited by the opportunities ahead for UHBW.



Jayne

Jayne Mee
Chair



Eugene

Eugene Yafele
Chief Executive

1. Our integration story

It is now almost three years since University Hospitals Bristol NHS Foundation Trust and Weston Area Health NHS Trust merged in April 2020.

Since that time, Weston General Hospital (WGH), as part of the new University Hospitals Bristol and Weston NHS Foundation Trust (UHBW), has been on a journey of development, working with its staff, patients, and stakeholders to realise the vision of being a vibrant and dynamic hospital at the heart of our community. There have been many challenges along the way, including the unexpected challenge of the coronavirus (COVID-19) pandemic.

Despite this, we have been able to make improvements in delivering quality health care at WGH that meets the health needs of the local population, strengthen our workforce, and start to secure some of the benefits for the hospital and its teams, of being part of a larger organisation. The integration has also provided the foundation for exciting work with integrated care system (ICS) partners, to secure the future of Weston General Hospital in the long term.

The Healthy Weston long-term vision, supported by public engagement, is for WGH to be a pioneer for successful local hospitals delivering truly integrated, safe, and high-quality services. The ambition for the hospital to develop centres of excellence for surgery and the care of older people, alongside having a dedicated unit for assessing and treating people quickly after coming to hospital in an emergency, has the potential to create a vibrant and sustainable clinical model of care for the future. Achieving this will both rely on, and reinforce, embedding integration and truly becoming one UHBW.

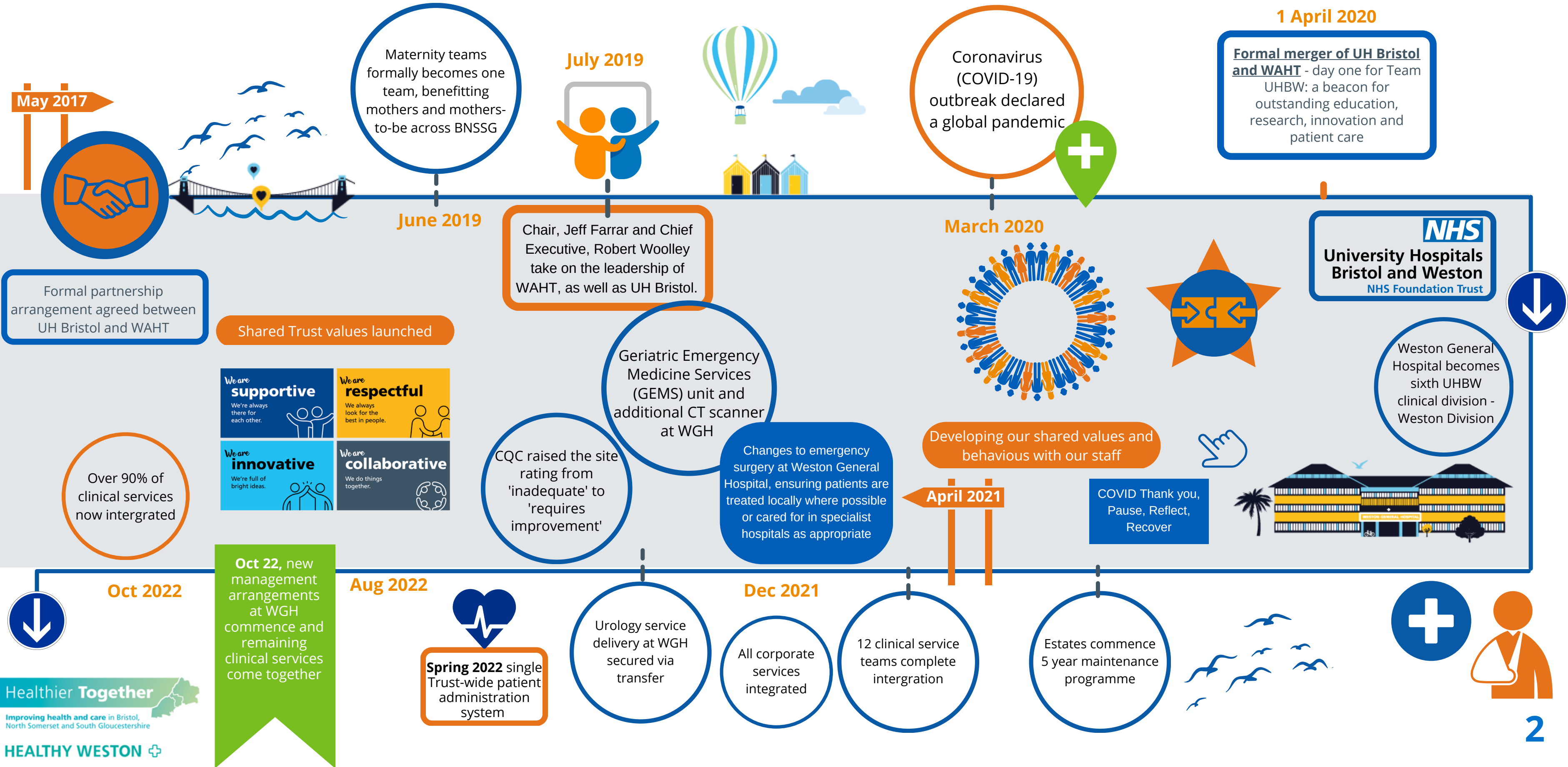
A roadmap of our integration story, which outlines the key milestones of the merger is set out on the next page. It serves as a helpful reminder of everything that has been achieved – the challenges, the celebrations, and the benefits – and also the direction of travel for the organisation, guiding us in our mission and supporting us to realise our vision.



Rob Gittins
Integration Programme Director



Becoming One organisation

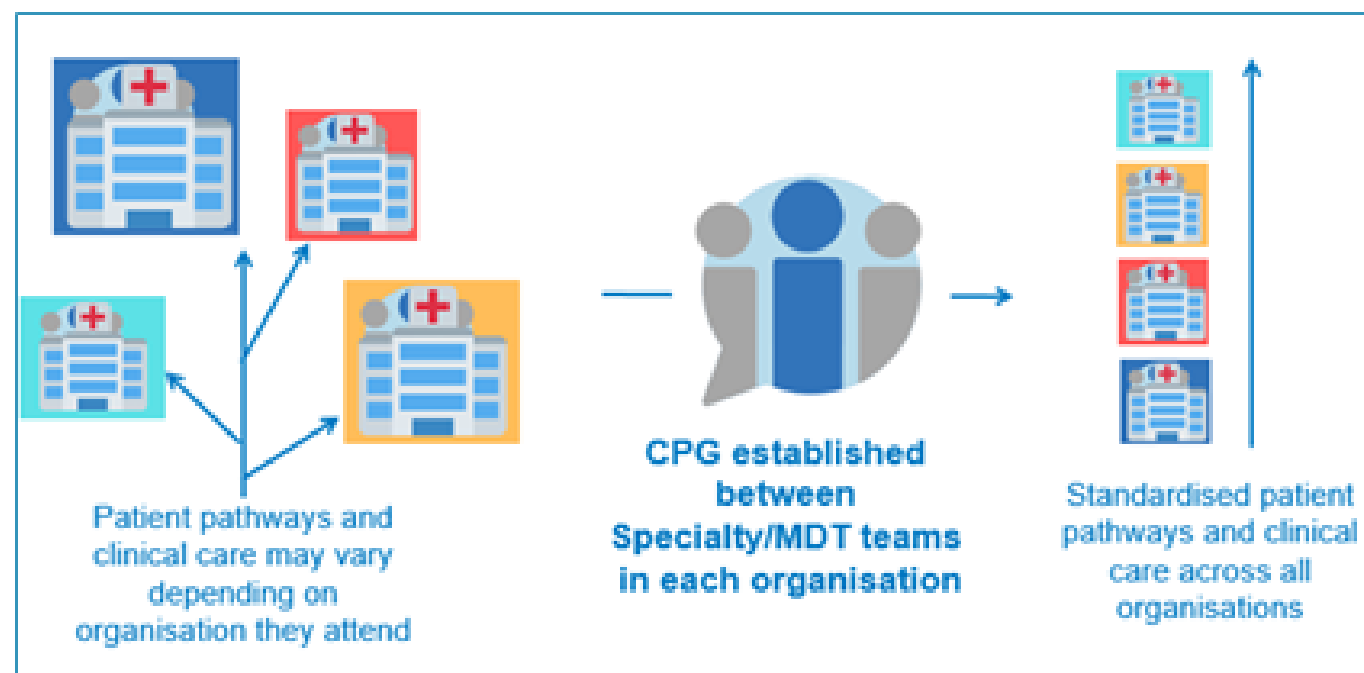


1. Our integration story (2)

Modern hospital care increasingly operates within complex health and social care systems, with many clinical services requiring a critical mass of expertise and equipment to deliver safe and sustainable care. Weston General Hospital was the smallest district general hospital trust in England and as a result of its size and relative geographical location found it increasingly difficult to operate sustainably as a standalone organisation.

Over the course of many years, different solutions with other organisations were considered, but a viable system partner could not be identified. Building on the long-standing clinical engagement between the two trusts, the University Hospitals Bristol and Weston Area Health NHS Trust clinical teams came together to collaborate on developing common patient care pathways, using a Clinical Practice Group (CPG) approach to provide more equitable access to care. Increasing collaboration over time led to a formal partnership being established in 2017, and eventually resulted in the development of a joint clinical strategy which formed the blueprint for a new organisation.

The Clinical Practice Groups (CPGs) approach



There were many benefits of building on the years of partnership working and taking the step to become one organisation. These include:

- Creating an even better experience for our patients – ensuring people from North Somerset and surrounding areas are able to be seen and treated in their local hospital and improving access to specialist services in both Bristol and Weston through better use of an expanded workforce, estates and facilities.
- Bringing stability to Weston General Hospital so that it remains at the heart of the community, providing services that meet the needs of its local people.
- A 13,000+ strong workforce increases our diversity, capacity, and resilience, allowing for greater development opportunities for our staff across a much wider portfolio of services, strengthening the knowledge base, peer support and skills and experience of all our employees.
- An opportunity to share expertise and best practice – particularly in the delivery of exemplar models of frailty, ambulatory and out-of-hospital care. Using the opportunity to develop and learn from each other to create truly joined-up care which enables people to stay in their own homes or return home as soon as they no longer need our care.
- The roll-out of digital technology across the new organisation to enhance and improve the quality and delivery of services across UHBW, further cementing our Global Digital Exemplar status. This not only helps our staff to do their jobs more efficiently, but brings real benefits to patients, who won't have to keep repeating the same information.
- Releasing untapped potential in our services – particularly in the development of medical and surgical ambulatory care, nurturing innovation and research, and empowering our teams to design services and pathways at the forefront of care

1. Our integration story (3)

At the point of merger, Weston General Hospital became the sixth clinical division within UHBW, with the focus in year one the immediate stabilisation of the hospital, establishing common governance and safety processes, and bringing together corporate services to create a firm basis for the later integration of clinical services.

The new arrangements commenced only days after the World Health Organisation (WHO) had declared the coronavirus (COVID-19) outbreak a global pandemic. Despite the operational impact of the pandemic response, the Trust was still able to roll out its ambitious integration plans although the full changes have taken longer to implement than originally planned.

The merger also presented the opportunity to move the ownership of some services to organisations better placed to deliver them. Whilst retaining access to these services in Weston-super-Mare, breast care and urology services transferred to North Bristol NHS Trust (NBT), child and adolescent mental health services (CAMHS) transferred to Avon and Wiltshire Mental Health Partnership NHS Trust (AWP) and community paediatrics transferred to Sirona care & health.

Developing and valuing our workforce is at the centre of making Weston General a sustainable hospital for the future. We have worked hard to engage with staff to understand what makes working at Weston General attractive and through investment in talent management, reward and wellbeing programmes, significant progress has been made with recruiting and retaining staff across a range of key professional groups. However, we understand that to attract consultants, our most senior clinical leaders to Weston General, requires a compelling future clinical vision for the hospital.

The Healthy Weston long-term vision for Weston General Hospital, developed with our health and social care partners, provides this compelling future clinical model of care. We will continue to provide all-age hospital services for local people, delivering the right care at the right time to enable patients to be assessed, treated and able to return home as soon as possible, together with developing centres of excellence for higher volume, lower complexity surgery and specialist care for older people.

Experience elsewhere shows that bringing two organisations together and achieving meaningful integration is known to take at least five to 10 years to achieve. With the steps taken over the last three years, and the planned roll-out of the ambitious Healthy Weston programme, Weston General Hospital has the opportunity to become a national exemplar for smaller hospitals.



"using the discipline of programme management for the complex merger process was essential but more fundamental was building relationships of trust and respect through leadership behaviours"

Paula Clarke, Executive Managing Director (Weston)

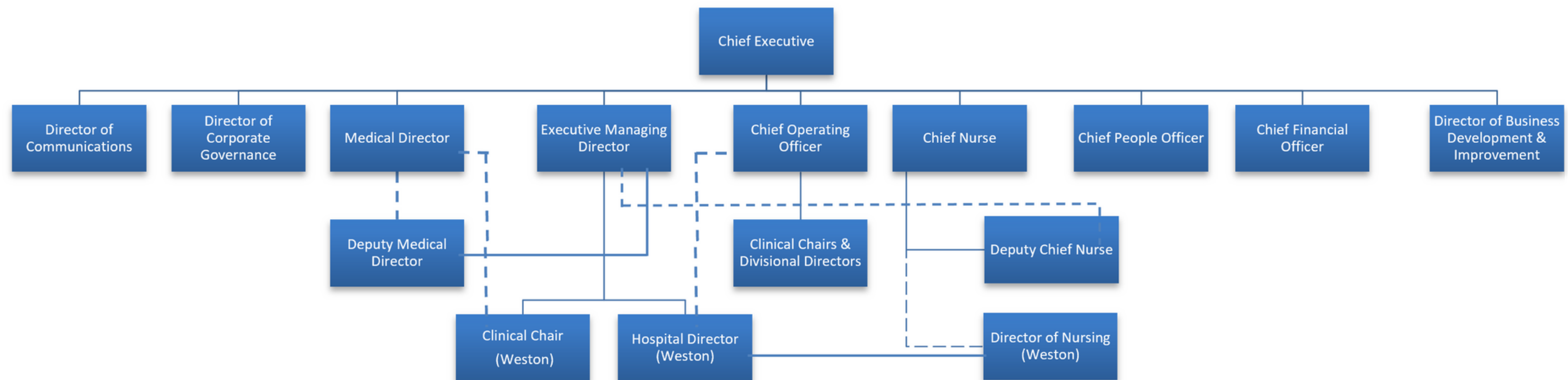
1. Our integration story (4)

Looking to the future, an important milestone in the UHBW merger journey was reached in October 2022, with the new management arrangements at Weston General Hospital commencing. This achievement not only benefits colleagues, but also patients, enabling the Trust to begin to deliver equitable access to services across Bristol and Weston. Following the changes, a further 14 clinical services have come together, meaning that over 90% of clinical services across UHBW are integrated, with the Weston General Hospital team providing a range of services in partnership with the Trust divisions.

“I am proud that Weston General Hospital is now seen by the UHBW nursing leadership as a place to innovate and develop new approaches to nursing practice, for example within the Aging Well programme”

Mark Goninon,
Deputy Chief Nurse

New organisational structure, including the WGH leadership team



Accountability for Services at Weston General Hospital

(commenced 17 October 2022)

<p>Services managed by the Weston General Hospital (WGH) team</p>	<ul style="list-style-type: none"> • All wards • General nursing • Acute Medicine (inc. AEC, AMU) • Medical secretaries • Reception teams 	<ul style="list-style-type: none"> • Theatres & Day Case Unit • Outpatients (Main, Quantock & Orthopaedics) • Emergency Department • Care of the Elderly & Frailty (until integration completed) • Stroke Services
<p>Services managed by divisions</p> <p><i>We are supportive respectful innovative collaborative. We are UHBW.</i></p>	<p>Division of Diagnostics & Therapies</p> <ul style="list-style-type: none"> • Radiology · Pharmacy • Audiology · Resus • Therapies • Laboratory Services • Infection Prevention & Control (IPC) & Tissue Viability • Medical Physics & Bioengineering <p>Division of Medicine</p> <ul style="list-style-type: none"> • Rheumatology • Diabetes & Endocrinology • Gastroenterology & Hepatology • Respiratory · Sexual Health • Dermatology <p>Division of Women's & Children's</p> <ul style="list-style-type: none"> • Obstetrics (inc. Maternity services) • Gynaecology · Paediatrics 	<p>Division of Surgery</p> <ul style="list-style-type: none"> • Critical Care & Outreach · Anaesthesia • Pre-Operative Assessment · Ophthalmology • Endoscopy · Trauma & Orthopaedics • General Surgery (inc.GI) • Ear, nose, & throat (ENT) • Cancer Services (MDT Co-ordination) • Sterile Services <p>Division of Specialised Services</p> <ul style="list-style-type: none"> • Cardiology (inc. cardiac rehabilitation & outpatients) • Haematology & Oncology • Cancer Personalised Care (PCS) teams • Palliative Care <p>Chief Operating Officer's Office</p> <ul style="list-style-type: none"> • Site & Patient Flow · Integrated Discharge Service • Booking & Access team

2. Our key messages

Investment in international recruitment has been successful in encouraging overseas nurses to work at WGH

The CQC health regulator has changed their overall rating for Weston General Hospital from 'inadequate' to 'requires improvement', reflecting improvements made in quality of care and reduction in risk

The exciting Healthy Weston 2 vision for the long term future of WGH has been developed with system partners, and is now being implemented

Recruitment of non-consultant medical posts has steadily improved since merger

The process of embedding our new shared values is a long-term project and will continue to guide how we develop and grow as an organisation

More than a third of expected benefits of merger have already been realised, which is ahead of our plan

New management arrangements at WGH are providing strong on-site leadership, and a shared platform for the future delivery of Healthy Weston 2

The five-year Digital Systems Convergence programme has replaced legacy IT systems at WGH, creating modern cross-site solutions that enable better management of patient care

UHBW is making good progress towards achieving organisational integration. It is an ongoing journey, and is expected to continue for at least a further five years

Over 90% of all clinical services are now integrated under single UHBW divisions.

Investment of £5m since merger has reduced estates and infrastructure risks at WGH, with a further £5m of investment planned over the next two years

3. About us

University Hospitals Bristol and Weston NHS Foundation Trust (UHBW) is one of the country's largest acute NHS trusts with an annual income of over £950m, bringing together more than 13,000 staff to deliver over 100 different clinical services across 10 hospital sites.

The Trust provides services in the three principal domains of clinical service provision; teaching and learning, and research and innovation. The most significant of these with respect to income and workforce is the clinical service portfolio consisting of general and specialised services. For general provision, services are provided to the population of central and south Bristol and North Somerset, around 350,000 patients.

These are largely delivered from the Trust's city centre campus and from Weston General Hospital in Weston-Super-Mare, with the exception of a small number of services delivered in community settings such as South Bristol Community Hospital. Specialist services are delivered to a wider population throughout the South West and beyond, typically between one and five million people. The main components of this portfolio are children's services, cardiac services and cancer services as well as a number of smaller, but highly specialised services, some of which are nationally commissioned.

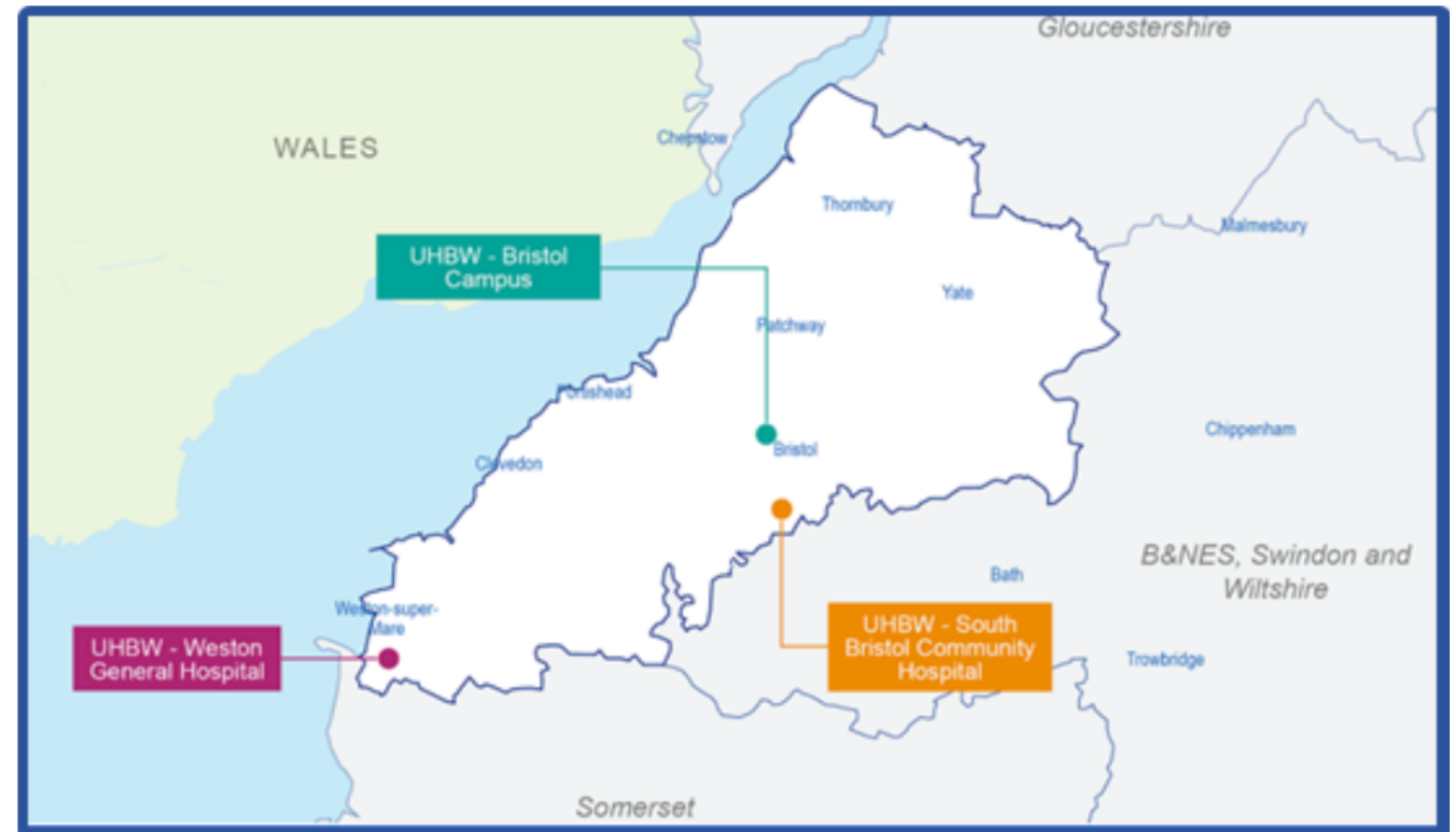
Weston General Hospital is on the outskirts of Weston-super-Mare, providing acute services to the local population of North Somerset, each year, it provides:

- over 45,000 A&E attendances, and
- cares for over 29,000 inpatient and day-case patients, and undertakes 98,000 outpatient appointments.

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#TeamUHBW

Locations of the UHBW sites and services within Bristol, North Somerset and South Gloucestershire.



4. The first post-merger review

In January 2021, the first post-merger review reported that the Trust had made good progress in establishing the processes to deliver integration as set out in the Post Transaction Implementation Plan (PTIP). However, assurance on expected delivery at this point in time was assessed as partial.

Key milestones completed after this first assurance report included:

In June 2021, the Trust took the decision to place an executive triumvirate leadership team at Weston General Hospital (WGH), with a managing director, site medical director, and deputy chief nurse, strengthening operational delivery, and co-ordinating improvement, staff and stakeholder engagement.

In September 2021, the Trust extended the two-year programme of change by a further year, with service integrations to be completed by the revised date of October 2022, and with a date of March 2023 to complete the programme and move into business as usual.

In November 2021, the Trust decided to strengthen the proposed management model at WGH and create a joint approach for most medical and surgical services.

In March 2022, the business case for future management arrangements at WGH was agreed, with:

- A new entity known as The Weston General Hospital Management Team to be established from October 2022, replacing the current Weston Division
- The WGH management team being responsible for leading the site and a range of clinical services and facilities
- All other clinical services becoming Trust-wide by October 2022 and be wholly run and operated by UHBW-wide clinical divisions



“Responding to the COVID challenge highlighted the fragility of acute medical services at Weston, and the necessity of dedicated on-site divisional and executive leadership. I am proud that we were able to respond proactively to events and ‘alter course when the wind changed direction’”

Ian Barrington, former Managing Director (Weston)

5. The second post-merger review

By May 2022, the second post-merger review reported an improving picture with corporate services integration completed, and 12 of 34 clinical services also integrated. However, it was noted that the effect of the coronavirus (COVID-19) pandemic response had been to slow down progress with organisational integration.

Following a review of the second post-merger report with the chair of the Audit Committee and director of corporate governance, a simplified set of best practice indicators were proposed, against which to assess the degree of organisational integration maturity, which are outlined later in this document.



Case Study: Integrated Discharge Pilot



THE WESTON PILOT PROJECT CONSIDERED

Those patients who were medically optimised for discharge yet needed some care or support to get them home safely (pathway 1 patients). Sirona (community health provider) offers this service from Weston hospital, however due to staffing pressures in the Community, there has been a significant delay and long waits in hospital for some patients.

The pilot at Weston General Hospital (WGH) took a very proactive and engaging approach with patients, families, friends, and the voluntary sector (including the Red Cross), for all those patients awaiting this method of discharge once we were given a start date for the formal care.

These conversations considered the real life requirements to support patients with getting home earlier than their discharge date until more formal support was available.

“This Weston pilot has saved 79 bed days over the first 30 days of the project. The team have been motivated, engaging and enthusiastic in carrying this work out and have really bought in to the new ask.”

Stephen Cutler, Clinical Lead for the Integrated Discharge Service

THE PILOT'S IMPACT

Through the trial at WGH, the Pilot scheme saved **79 bed days over the first 30 days of the project**. The teams involved have been motivated, engaged and enthusiastic in carrying this work out and this has been highlighted in their early success.

This is an excellent example of integrated working which began in Weston and has subsequently been rolled out across the Bristol site. This rollout was made easier because the services had integrated and were working collaboratively under their single management structure.

This pilot was driven by a desire to incorporate the patient's family into the discharge process, but it has also shown a willingness to think outside the box and be adaptive. With this new formal process being applied to all patients who meet the criteria, it has helped the teams to adapt to it quickly and passionately, and to get great results.

THE NEXT STEPS

The next phase of the project is to incorporate the work with therapy teams to enable the planning and conversations with the patients and families to happen as early as possible, with further options for safe discharges to be considered as part of the wrap around care planning for the patient.

6. Assessment of our Integration maturity

The following table sets out a simplified set of best practice indicators, against which to assess the degree of organisational integration maturity.

Against these 10 indicators, UHBW is making good progress towards achieving organisation integration. Further work programmes are in place for indicators that are not yet fully realised, with oversight of progress undertaken by the Executive Committee, driven by the Post Integration Oversight Group.

Domains	Indicators of integration	Corporate	Clinical	Description
Leadership	1. There is a single UHBW leadership and accountability structure in place.	FULL ASSURANCE	PARTIAL ASSURANCE	In place for corporate services, but it is expected that the new clinical services management arrangements will take time to embed.
People & Culture	2. There is a single People Strategy in place (incorporating culture and OD).	FULL ASSURANCE	FULL ASSURANCE	People Strategy for UHBW 2022-2025 in place since September 2022.
Corporate	3. Corporate functions are fully integrated.	FULL ASSURANCE	N/A	Completed in April 2022, confirmed with internal audit.
Business planning	4. There is a single integrated business planning framework.	FULL ASSURANCE	FULL ASSURANCE	Business decisions on priorities and resource allocation are undertaken as a single Trust.
Business planning	5. Divisions have fully integrated cross-site operational plans.	FULL ASSURANCE	PARTIAL ASSURANCE	Will become aligned across specialities and sites in 2023/24 OPP (operating planning process).

Domains	Indicators of integration	Corporate	Clinical	Description
Performance	6. There are common reporting mechanisms (KPIs) in place.	FULL ASSURANCE	FULL ASSURANCE	Single Board-to-floor reporting in place with common indicators.
Risk	7. There is a single Risk Register and Risk Management framework in place.	FULL ASSURANCE	FULL ASSURANCE	Single Trust-wide register and framework in place.
Estate	8. The corporate estates function is integrated with a single Trust Estates Strategy.	FULL ASSURANCE	FULL ASSURANCE	The function is integrated, and the Estates Strategy has been refreshed (approved by Board Oct 22).
Policies	9. There is a single set of policies and processes (where appropriate) in place.	PARTIAL ASSURANCE	PARTIAL ASSURANCE	There remains a small number of policies to be reviewed and merged as part of the normal Trust policy review cycle.
Digital	10. Core Digital and Technological solutions are fully integrated across UHBW.	PARTIAL ASSURANCE	PARTIAL ASSURANCE	Digital convergence programme three years into five year timeline.

our values
It's who we are

"Now that clinical teams are together under single divisions, we have the opportunity to drive improvement and standardise the way we deliver care. However, I am under no illusion that the next phase of transition, as we recover from the impacts of COVID, will require sustained and dedicated work by teams over many years, to realise this."

Alison Lowndes, Divisional Director (Surgery)

7. Our values, our people strategy

Having a common set of shared values is important in all organisations and thousands of staff played an active role in deciding what the UHBW values should be. This involved extensive conversations, surveys, focus groups and voting, talking about how best to reflect what working at UHBW should feel like, and what the Trust collectively stands for.

The UHBW values are more than just words, they give a sense of community and bind the organisation together as a collection of thirteen and a half thousand colleagues, and demonstrate what patients and their loved ones, as well as prospective employees, can expect from UHBW.

The UHBW People Strategy 2022-2025 emphasises that people are at the heart of the services provided by the Trust and are key to delivering the mission to improve the health of the local population.



our values *It's who we are*

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8. Improving our workforce

When the Trust approved the business case for the organisational merger, it recognised that a key enabler of improvement at Weston General Hospital (WGH) would be the recruitment of more substantive staff across the clinical professions. The five-year plan to achieve this is showing results, supported by dedicated recruitment and retention investment. The following points highlight how we are improving our workforce:

1. Recruitment and retention

Expanded registered nursing and medical workforce at WGH, through significant investment into targeted recruitment and retention activities, including 117 internationally educated nurse appointments since April 2021.

2. Change management

Introduction of new organisational structures to better meet the needs of the merged organisation, supported by successful change management and staff consultations.

3. Organisational development

Common UHBW vision, values and behaviours developed with over 5,000 staff, supported by an externally-led engagement process.

4. HR systems

Deployment of eight common HR information systems including ESR, Allocate and Kallidus to support Trust-wide staff management and information, rostering, and training.

5. Training and education

Enhanced access to Trust-wide training and development opportunities, with the number of courses increased from 70 to over 250 for clinical practice and career development.

Over 7.5% of staff at WGH now undertaking apprenticeships.

6. Policy framework

Alignment of the HR policy framework Trust-wide.

7. Premium payments

UHBW agency, locum and bank worker controls embedded at WGH.

8. Pay and conditions

Addressed equality in pay for some roles to ensure consistency across UHBW.

“Our staff attraction strategy needed to be dynamic, offering attractive reasons to work and develop careers in Weston, growing our workforce locally, including the expansion of apprenticeships and flexible roles.”

Alex Nestor, Deputy Chief People Officer

Case Study: International Nurse Recruitment



OUR IMPACT

Working as an integrated team across Bristol and Weston the international nurse recruitment programme has been a success in its first year, having recruited 282 IENs across all divisions from April 2021 – May 2022. Impacts of the programme include:

- Internationally Educated Nurse (IEN) recruitment and training is a formalised and integrated programme with monthly cohorts arriving.
- An in-house Objective Structured Clinical Examination (OSCE) support provision - after using an external provider to support the programme when it first started, the Trust has now created an in-house OSCE bootcamp that runs in tandem with the arrivals.
- The pastoral support offering has been well received by the IENs. 91.41% of the IENs said they were either very satisfied or satisfied in a recent survey. The pastoral offering is always being developed and currently guides are being created for the wards to educate staff on how best to welcome and support IENs.
- The introduction of 2 Clinical Pastoral Managers to further support IENs with their careers at UHBW funded by NHS England & Improvement.
- Moved to a 3-month model for accommodation, with first 2 months paid for by the Trust as part of their relocation package, with the option to pay for a 3rd month to aid them settling into life in the UK.
- Vacancy rates for Band 5 Nursing in Weston has dropped by 21% since February and the Weston turnover rate continues to be the lowest across the Trust.

SITUATION

To mitigate the shortage of the domestic nurse supply and to stabilise the nursing workforce Internationally Educated Nurses (IENs) are recruited to UHBW. Prior to merger Weston had a relatively small scale international nurse recruitment programme that was delivered by one recruitment lead; however, this programme came to an end in the run up to organisational merger in 2020

OUR ROLE

The Resourcing and Education teams across Bristol and Weston have worked collaboratively with the Divisional Recruitment and Retention Leads to develop and deliver an international nurse recruitment programme at scale to support both the newly integrated Weston Division but also the wider Trust. The programme started in January 2021, with the first nurses arrived in the UK in April 2021. To create this successful programme, the teams:

- Established a working group to agree and standardise processes for recruiting IENs.
- Funded and appointed the following staff to ensure the smooth running of the programme: Programme Lead, Overseas and Relocation Pastoral Managers in Bristol and Weston, Objective Structured Clinical Examination (OSCE) Lead, OSCE Trainers, Clinical Pastoral Managers in Bristol and Weston, Accommodation Officer, and Recruitment Coordinators.
- Created an in-house OSCE bootcamp provision to support IENs ahead of their OSCE exam.
- Created a 12-week induction programme that includes digital training and wellbeing sessions.
- Created a 'Ward Readiness' programme including end of life care and specialist clinical training.
- Created a strong pastoral offering that starts once an IEN has a confirmed start date with the Trust and remains in place until they are employed for 3 months. The pastoral managers are key to making the IENs feel welcomed and supported amidst the many adjustments and challenges they will face during their first 3 months.
- After month 3 the pastoral support is provided by the Clinical Pastoral Managers, Practise Education Facilitators (PEFs) & Wellbeing nurses on the wards who play a key role in helping the IENs develop.

"The organisational merger presented a real opportunity to deliver a fully integrated approach to international nurse recruitment, the benefit of which is now really being felt across the organisation. The success is only delivered through collaborative working across internal partners."

Peter Russell, Head of Resourcing

9. Finance

The financial case for merger included making both additional investments and setting a target for savings. £2.0m has been saved against the original target of £5.2m, a shortfall of £3.2m. Savings from moving to a single Trust Board were achieved in full, with partial savings made against the nursing agency target. Further work has continued into 2022/23 to address the shortfall, with approximately £0.3m additional nursing agency savings forecast.

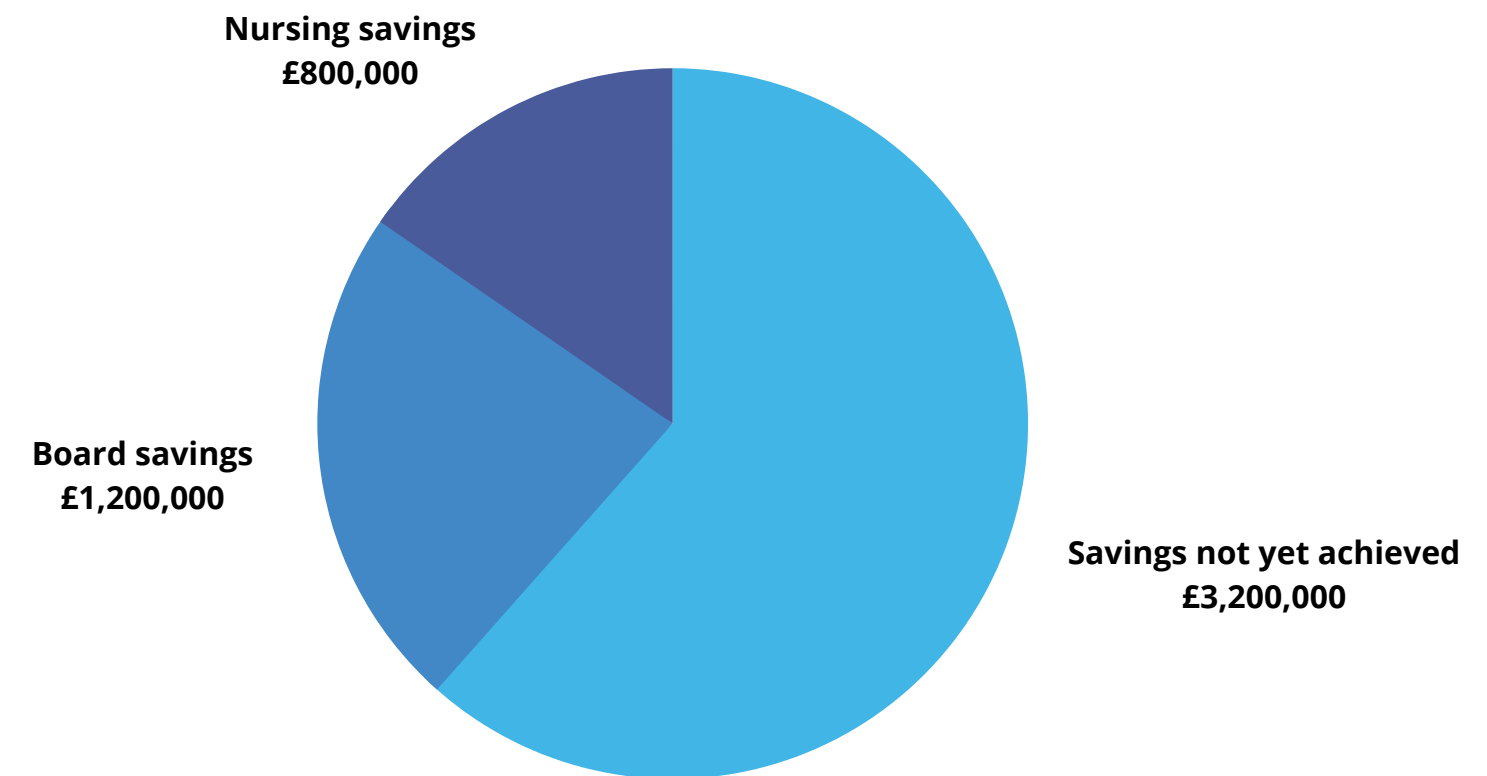
Due to increasing operational pressures and ongoing recruitment challenges, progress toward achieving the original medical agency and productivity targets targets has been difficult to achieve. It is anticipated that following clinical integration and embedding new clinical models in the future, further savings may be achieved.

Overall, £5.6m, £5.3m more than planned, has been invested to establish a sustainable UHBW staffing model moving forward. This included investment in response to CQC recommendations, investment into operational and corporate capacity and into clinical leadership.

£2.0m is covered by savings already identified, leaving a further £3.3m still to be identified in future years through the Trust's savings programme. In addition, significant investment has been made and will continue to be made to reduce the maintenance backlog at Weston General Hospital and improve the digital infrastructure.



Achievement of Savings



10. The benefits of merger

The Trust has worked hard to realise the benefits of merger, for patients, staff, and the wider community. Building on the years of partnership working between the two previous organisations, the Trust has endeavoured to:

- Create an even better experience for patients
- Bring stability to Weston General Hospital
- Develop the skills and experience of staff across a much wider portfolio of services
- Share expertise and best practice, particularly in the delivery of exemplar models of older people, ambulatory and out-of-hospital care
- Roll-out of digital technology to enhance and improve the quality and delivery of services across the new organisation
- Nurture innovation and research, empowering our teams to design services and pathways at the forefront of care

Almost three years on, it is encouraging to see that the delivery of the benefits of becoming one UHBW is well underway. Developing and valuing our workforce continues to be at the centre of assuring Weston General as a sustainable hospital, and major improvements are already evident in the recruitment and retention of a number of key professional groups, particularly in nursing staff and middle grade doctors. We have also significantly improved access to learning and development and increased apprenticeship opportunities, with 7.5% of staff at Weston General Hospital now undertaking apprenticeships and, despite the significant levels of change, staff engagement has also increased.

Significant progress has been made in consolidating systems, processes, and policies in support services, such as Digital, Estates, Finance, HR, and Workforce. We have also invested in upgrading the estate at Weston General Hospital and continue to do so.

Realising the benefits of merger in any organisation takes time, which is why they were timetabled over a five-year period. With six benefits now realised and sustained to date, and a further four predicted to realise in the next 12 months, despite the impact of coronavirus (COVID-9), the programme is ahead of the expected trajectory.



11. Benefits realised to date

	Workstream	Strategic intent statements (Transaction Business Case)	Description of benefit	Performance measure	Status
Workforce and OD	Recruitment and Retention	Providing a strengthened workforce with improved flexibility, recruitment and retention through maximising the opportunity of UHB's reputation and brand.	Improved recruitment and retention of nursing staff (nursing agency expenditure savings) - Reduction in vacancies, improved rostering, lost time management and financial controls.	Reduction in Registered Nursing (RN) agency expenditure Reduction in RN vacancies in Weston Reduction in RN turnover rates in Weston	Realised
	Organisational Development	To develop a new set of leadership behaviours and values across the new organisation, shaping the new culture.	Establish shared vision and values for the single UHBW organisation	New UHBW values established and Staff Survey 21/22 values question answer responses compared to answers given in staff survey 22/23	Realised
Clinical Integration	Resilience of Acute Services	Addressing in a controlled manner the current known risks to the resilience of acute clinical services across Bristol and North Somerset	Enhanced work with system partners - identify sustainable solutions to ensure high quality outcomes for patients - e.g. Urology transfer to NBT	Completion of Breast care and Urology transfer to NBT Integrated Critical Care and Regional Retrieve services in place	Realised
Strategic Change	Improved Utilisation of the Estate	Greater scope to make best use of the combined available capacity and buildings in order to deliver our service goals.	Improved utilisation of the combined UHBW Estate	Reduction in 'very high' infrastructure risks at WGH	Realised
	Resilience of Acute Services	Addressing in a controlled manner the current known risks to the resilience of acute clinical services across Bristol and North Somerset	Increase in resilience of Urgent and Emergency services and a reduction of risk in WGH	Reduction in numbers of 'must do' and 'should do' CQC actions in urgent and emergency services. Reduction in 'very high' risks on the Weston Division Risk Register.	Realised
	Staff Training and Development	Supporting staff to access a greater range of training and development, education, training and research opportunities across a wider organisation. Establishing the WGH as an 'anchor institution' in North Somerset with a reputation for providing high quality training and education	Increased range of staff development opportunities and increased access to training	Number of apprenticeships available in Weston. Apprenticeship new starters as % of workforce. Essential Training compliance. Library - number of evidence searches	Realised

Case Study: Human Resources Training & Development

SITUATION

Organisational merger in April 2020 created the opportunity to provide a wider and more sustainable Training and Education offer, bringing training resources and expertise together, to deliver mutually beneficial outcomes for the workforces in Bristol and Weston.

OUR IMPACT

Working as an integrated Training and Education team has facilitated improvements within the new organisation. These improvements include:

- A fully integrated model of education & a streamlined team function with over 50% of staff working across both sites.
- Introduction of a clinical outreach model and knowledge specialism at Weston.
- Improved learning environment through supporting new library breakout spaces.
- Increased numbers of apprenticeships offered with the 1st cohort of trainee nursing associates at Weston College.
- Local school engagement through investment in a dedicated Weston apprenticeship lead post.
- The UHBW SIM Service (clinical simulation) have made use of Weston College's healthy living campus to deliver SIM provision for Weston division staff.
- Functional skills standalone sessions being offered for staff upskilling.
- Medical education leadership and governance has been improved with one Director of Medical Education, supported by deputy roles, and administrative resources.
- Cross site alignment of corporate induction and essential training reporting.
- The overseas educated nurse recruitment and training is a fully integrated programme running across both sites delivered by the corporate education team and the Overseas (OSCE) lead.
- Prevention & Management of Violence & aggression (PMVA) training rolled out at Weston.
- Extension of clinical skills sessions offered as part of a timetable for example, NG tube insertion.

OUR ROLE

The Training and Education teams across Bristol and Weston have worked collaboratively with the Integration team to develop and deliver a programme of work to create an integrated department. This integration work included:

- Recruitment of a transitional Apprenticeship lead in Weston, a Library lead for both sites and a Corporate Education Administrator at Weston to progress and embed an improved cross site offer for Training and Development.
- Agreements with Weston College for the use of simulation facilities and the development of access to wider educational settings and placements across the Trust.
- Using Weston's expertise in international nursing recruitment to support the work of the Trust's International Nursing groups.
- Enabling access for junior doctors to online teaching and content sharing across both sites

“Working as an integrated Training and Education team has facilitated improvements within the new organisation. There has been increased capacity for apprenticeship provision and widening engagement activities”

Sarah Green, Previous Associate Director of Education



12. What the Care Quality Commission (CQC) says

The Care Quality Commission (CQC) undertook inspections of medical care at Weston General Hospital in March and June 2021, focusing on the safe and well-led key questions. The inspection resulted in a number of concerns being raised and the imposition of urgent conditions upon the Trust's registration under section 31 regulations (S31).

In October 2021, the WGH site was rated as 'Inadequate' by the CQC. Overall UHBW was rated 'Good'.

The Trust was required to take immediate actions and responded by developing a sustainable medical workforce model and making improvements to the quality and safety of medical services, alongside strengthening the senior leadership at WGH by establishing three new dedicated senior roles, a managing director, a site medical director, and a deputy chief nurse.

Subsequently, in August 2022, a targeted follow-up inspection was undertaken by the CQC in view of the conditions which had previously been imposed on the Trust. The CQC, recognising positive improvements in medical services at WGH and in how the site was well-led, raised the site rating to 'requires improvement' and removed the conditions upon the Trust's registration.

CQC rating of WGH Medical services October 2022

	Safe	Effective	Caring	Responsive	Well-led	Overall
Medical care (including older people's care)	Requires Improvement ↑ Oct 2022	Good ↑ Oct 2022	Good ↔ Oct 2022	Requires Improvement ↔ Oct 2022	Good ↑↑ Oct 2022	Requires Improvement ↑ Oct 2022

"Leaders had the capacity and skills to run services well. They had used these skills to lead improvements in services and engage staff in the plans for the future. Staff felt invested in the success of the service and demonstrated fortitude and resilience in the face of ongoing pressures. Staff were clear about their roles and responsibilities. The service engaged well with patients and the community in planning for the future of the service."

Care Quality Commission (CQC) – Inspection Report (Weston General Hospital, medical care) August 2022, page 3

"We welcome the improved CQC rating for medical care services at Weston General Hospital. Three of the five areas assessed are now rated Good, with an improvement in our overall rating for these services to Requires Improvement. We are pleased inspectors found many positives, including how staff treat patients with compassion and kindness, respect their dignity and take account of their individual needs. Whilst all this is a significant step in the right direction, we know there is more to do. We are committed to making the necessary improvements, building on the many successful initiatives already underway and ensuring our talented and dedicated staff have the time and resources they need to deliver excellent care to our patients."

Eugene Yafele, Chief Executive

13. Key programmes enabling integration

Improvements to the physical and digital infrastructure at Weston General Hospital have been key enablers to the journey of integration.

Digital convergence

The UHBW five-year Digital Convergence Programme is replacing outdated legacy IT systems at WGH and moving to modern Trust-wide solutions that enable better and more flexible management of patient care by clinicians.

A major step on this journey was merging the two versions of the patient administration system (Medway) in April 2022. Delivering one single Trust-wide Electronic Patient Record (EPR) and a range of associated clinical systems in place across all UHBW hospitals and sites, benefits patient safety, patient care and patient experience. It will also release time and resources of colleagues across Bristol and Weston.

Estates improvement

The Transaction Business Case acknowledged that estates and facilities at WGH had been underfunded for several years, leaving a significant estates and infrastructure risk and a maintenance backlog programme of £17.5m. To address this, and as part of the 2020 Transaction Agreement, NHS England and NHS Improvement (NHSEI) approved £10m of capital funding over five years which is being used to improve legacy infrastructure and estate maintenance, to modernise facilities and provide a safer patient-care environment for the long term. The dedicated programme is at its midpoint, with 50% of the planned works completed at WGH, and due to fully complete in 2024/25.



Case Study: Gynaecology Services

SITUATION

Gynaecology Services across the Trust merged in October 2021, bringing together two services and teams, to provide a wider and more sustainable service delivery model. The administrative function and performance reporting followed in February 2022; This now gives us the broader expertise of the Bristol larger teaching hospital with the strengths of the local service approach at the Weston site.

USING TECHNOLOGY TO IMPROVE SERVICES

At present this remains challenging. Gynaecology services in Weston use a combination of paper notes and electronic systems. As the Trust rolls out technology, such as the Evolve system, clinicians will be able to access scanned paper case notes from wherever they are, improving the management of the patient's journey.



INTEGRATED PERFORMANCE MANAGEMENT

Following the merging of the waiting lists and transfer of the booking function to the Bristol site in February 2022, we are now able to manage our performance cohesively, and for women across both sites to be managed by one team.

OUR IMPACT

Initially there was some nervousness about integration. However, as a lot of the doctors had previously trained in the region at both centres, there was a foundation of respect on both sides which has been built on.

The last two years, with the impact of Covid, have been very challenging. Being an integrated service has helped us to maintain services and better cover staff absences across sites.

Maintaining a local and vibrant service at Weston for the women of North Somerset is very much part of the strategy, and over the last year we have started to provide additional sub-specialty clinics on the Weston site, with plans for others to be added in the future – for example, colposcopy.

Gynaecology Consultants now meet weekly via Teams to discuss operational matters across both sites, and future service developments – and particularly how inequalities in service delivery for patients can be further reduced, particularly for disadvantaged groups. The clinical teams now undertake joint audit.

Working in a small district general hospital can feel isolating, so the aim is that all gynaecologists will undertake regular sessions at the larger teaching hospital, enhancing opportunities for continued professional development. We are also starting to bring the junior doctor gynaecology trainees together in a single rota.

Finally, we are in the process of harmonising patient information and clinical protocols, to ensure that women in our care have the same excellent experience wherever they are. We have also standardised equipment and increased the levels of kit available at Weston, so women can access the same outpatient procedures in Weston as in Bristol. We are also working hard to ensure that any women transferring between our sites experience a seamless pathway.

“Having consultants already working at the Bristol site made integration easier.”
Dr Viola Mathew, Consultant, Obstetrics and Gynaecology, Weston General Hospital

14. Reflecting on what we have learnt

Applying important lessons to prevent future mistakes is a core reason why we capture lessons learned; it can also help us save time and money. Some of our key lessons are outlined below:



Key lessons learnt:

- Actively pilot new projects and innovations at the new hospital site to demonstrate capabilities builds awareness and trust.
- Regularly communicate and celebrate success with staff throughout the process of becoming one organisation, even when there is nothing to report.
- Be flexible enough to change the approach when information on the ground changes.
- Managing services across multiple sites, requires more management, corporate, and clinical resources than initially expected and for a significant period of time.
- Maintaining ambition and a firm grasp on the vision, not just at the start, but throughout the programme and beyond, ensures it remains a strategic priority.

The Post Integration Programme Oversight Group (PIOG), established on behalf of the Executive Committee, will continue to monitor:

- Follow through on learning lessons
- The new management arrangements
- Completion of outstanding work areas
- Ongoing realisation of business case benefits

15. Our future vision

It was always understood that bringing two organisations together takes time – at least five to 10 years – and an important milestone on this journey has been the go-ahead given to the Healthy Weston long-term vision to develop Weston General Hospital into a thriving hospital at the heart of the community.



HEALTHY WESTON +

An eight-week period of engagement with members of staff and the general public took place in June, July, and August 2022 and overall, there was wide support for the plans. People shared their views on the extra travel that could affect a small number of patients. People also said that more could be done around communicating the plans, as part of enhancing the reputation and trust in Weston General Hospital. As a result of this engagement, the Trust, with its partners, is considering how it builds these comments into its future plans.

The improvement proposals have been agreed for delivery over three phases as follows:

Phase 1

Focusses on introducing and enhancing a range of front door services, including Same Day Emergency Care (SDEC) and the expansion of Geriatric Emergency Medicine Service (GEMS), to ensure a modern and fit-for-the-future Emergency Department at WGH.

Phase 2

Focusses on the development of specialist multidisciplinary care of older people wards and the transfer of some inpatient beds to other larger acute sites for specialist medical care.

Phase 3

Will drive the development of the surgical centre of excellence at WGH primarily focussed on high-volume, low-complexity procedures.

“As the Trust Freedom to Speak Up Guardian, it remains important to ensure that staff at Weston feel like they have a voice in developing the future direction of travel of the hospital. The development of the Healthy Weston vision is one good example of how to engage effectively with a cross-section of staff”

Eric Sanders, Director of Corporate Governance

“Having integrated our clinical teams Trustwide and achieved system-wide support for the Healthy Weston clinical model, we now have the opportunity to realise the potential of Weston General Hospital. That is why it’s now imperative that we hold firm to the vision”

Mr Andrew Hollowood, former Deputy Medical Director

Meet the Weston General Hospital Leadership Team



Judith Hernandez del Pino
Hospital Director



Jim Portal
Clinical Chair



Joanna Poole
Director of Nursing



Paula Clarke
Executive Managing Director



Dr Rebecca Maxwell
Deputy Medical Director



Mark Goninon
Deputy Chief Nurse



Julie Page
Deputy Divisional Director
(medicine)



Karen Maxfield
Deputy Divisional Director
(surgery)



Elaine Williams
Deputy Director of Nursing



Koye Odutola
Deputy Clinical Chair
and Clinical Director (surgery)



Dermot Dowds
Clinical Director (medicine)



Dr William Hicks
Guardian of Safe Working



Steph Curtin
HR Business Partner



Amanda Stark
Finance Manager

16. Closing remarks from Executive Managing Director, Paula Clarke

UHBW was established as a new organisation on 1 April 2020. Since then significant work has been undertaken to merge and integrate the two predecessor organisations, consciously evolving the new organisation to one that has the right culture, and that maintains a focus on patient safety, patient and colleague experience and high-quality care.

It is now time for us to leave behind the language of merger and integration and look forward to the future as one #TeamUHBW.

This includes our intent in 2023, to refresh 'Embracing Change, Proud to Care – Our 2025 Strategy' to fully reflect both the opportunities created through becoming UHBW, the strategic plans within the Healthy Weston programme, and our Acute Provider Collaboration with NBT. Significant transformation will also be delivered over the coming years as we fully implement our developing Patient First continuous improvement strategy. The work undertaken to date reflected in this report, and the exciting future plans that have been made, could not have been achieved without the support of organisations within the Bristol, North Somerset, and South Gloucestershire Integrated Care Partnership. Continued collaboration will be key to successful delivery of the vision for Weston General Hospital.



"Weston General Hospital has come through some difficult times in recent years and now has an exciting and achievable future.

We will continue to provide all-age hospital services for local people, delivering the right care at the right time to enable patients to be assessed, treated and able to return home as soon as possible and we will develop centres of excellence for surgery and care of older people.

I believe Weston General Hospital can become a national exemplar for smaller hospitals - the future is bright!"

Paula Clarke, Executive Managing Director (Weston)