



Welcome by

Miriam Harte

Chairman



making a

difference

together



MERIDEN

The Meriden Family Programme

The Meriden Family Programme

Mission Statement

Meriden Family Programme's mission is to improve the experience of families in contact with services, locally, nationally and internationally.

Vision Statement

Families are at the heart of quality service delivery

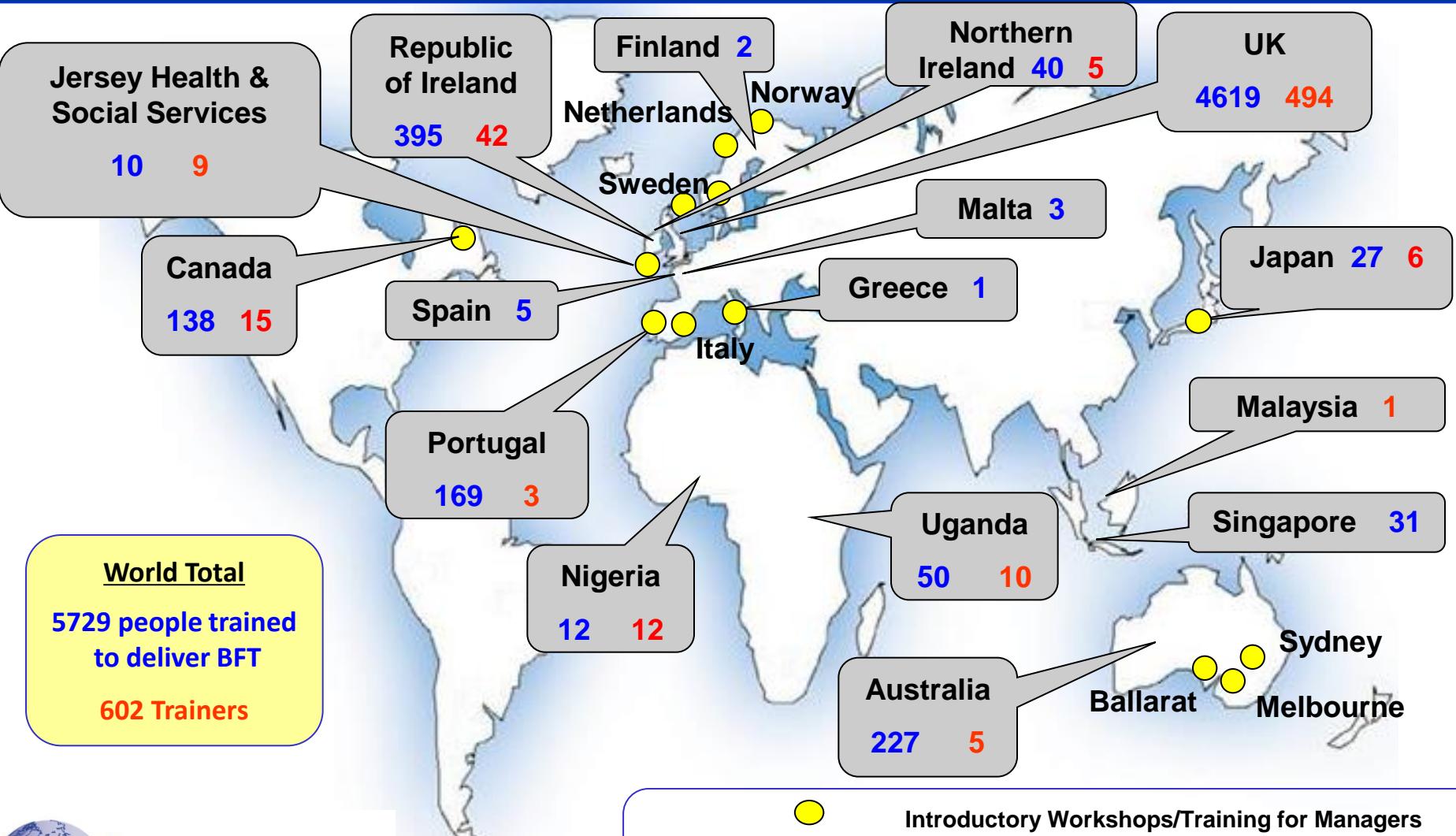
Aims of the Meriden Family Programme

- Support organisations to provide services that are sensitive to the needs of families'
- Ensure that evidence-based family approaches are routinely available to families
- Ensure that staff have the skills necessary for carrying out this work
- Ensure that organisations develop a culture that supports clinicians to work with families

The Meriden Family Programme

- Part of Birmingham and Solihull Mental Health NHS Foundation Trust
- Majority of work is training people in family work
- Also train people to deliver their own training
- Small team
 - Six clinical staff (4.5 WTE)
 - Three Carer Consultants (part time)
 - Three admin staff

Meriden Activity Worldwide



Exercise on training courses

Think of a time when a member of your family was unwell.

- How did you feel?
 - How did this impact on family relationships?
 - What was good about your contact with services?
 - What could services have done differently?
-
- This reinforces the idea that having an unwell family member is a universal experience

The Experience of Families

The Experience of Families

Families are trying to deal with complex situations and behaviours:

- without knowledge
- without training
- without a break (24 hours a day)
- with someone to whom they have a strong emotional attachment

Common Issues for Families

- Constraint on social activities
- Effects on work
- Effects on other family members
- Feelings of guilt, loss – grieving process
- Family relationships strained
- Stigma and isolation

Common Issues for Families

- Diagnostic uncertainty
- Difficulty understanding the health system
- The primary/secondary care interface
- Lack of information
- Lack of involvement
- Confidentiality

What families need/want

- Information
- Advice on how to support their loved one
- Work in partnership with clinicians
- Encouragement to look after themselves
- Families will feel that they need to respond to their situation – to do something

What staff can do

- Be confident with confidentiality
- Identify strengths of the family
- *Family are doing the best they can with the knowledge they have*
- *Separate the actions and the intentions of the family*
- Think of the family as a resource to help them

Contact Details

The Meriden Family Programme
Birmingham and Solihull Mental Health NHS Foundation Trust
Tall Trees Building, Uffculme Centre
Queensbridge Road, Moseley
Birmingham B13 8QY

Tel: 0121 301 2896
Fax: 0121 301 2891
Email: bsmhft.meriden@nhs.net

Website: www.meridenfamilyprogramme.com

How this has worked in the Trust

- Stephanie Common, Consultant Applied Psychologist
- Alix Bowler, Psychological Therapist

making a

difference

together

Questions

making a

difference

together

Break time – restart at 6pm



@TEWV #TEWVAGM

making a

difference

together



Welcome by

Miriam Harte

Chairman



making a

difference

together



Ann McCoy

Lead Governor



making a

difference

together



Chief Executive's Report

Reflections on 2018/19 and our future plans



making a

difference

together



***“Our overriding purpose
is to minimise the impact
that mental illness or
learning
disability has on a
person’s life.”***



making a

difference

together

Community services

- When talking to local people we are told that people want to be **supported at home** where possible
- We have been working hard to make this happen, particularly through engagement work in Hambleton and Richmondshire and Harrogate



making a

difference

together

Improving services

- Progress building Foss Park
- Physical health services
- Trust Autism framework
- Frailty clinical link pathway



making a

difference

together

New and extended services

- Trustwide perinatal services
- HMP Haverigg
- Liaison and diversion services



making a

difference

together

Partnership working

- Durham, Darlington and Teesside NHS mental health and learning disabilities partnership
- New care models

making a

difference

together

NHS70



making a

difference

together

Our Quality Priorities – How did we do?

Priority 1 - Reduce the number of preventable deaths

Priority 2 – Improve the clinical effectiveness and patient experience at times of transition from child to adult services

Priority 3 – Making care plans more personal

Priority 4 – Develop a Trustwide approach to dual diagnosis which ensures that people with substance misuse issues can access appropriate and effective mental health services

Priority 5 – Review our urgent care services and identify a future model for delivery

Our staff



making a

difference

together

How we performed

- **What do service users say?**
 - **91% of patients reported their overall experience as excellent or good**
 - **85% of patients report that staff treated them with dignity and respect**
 - **62% of inpatients said they always feel safe on the ward**
- **Performance against targets**
 - **87% of people were seen within four weeks of referral**
 - **93% staff completed mandatory and statutory training**

Looking to the future

- Promote recovery
- Continue to work with, involve and support carers
- Continued focus on improving quality of services
- Supporting the whole health and social care system to work in a more integrated, effective and efficient way.

making a

difference

together

Annual General Meeting

Financial Review

2018 - 2019

making a

difference

together

Summary of Financial Performance

- In 2018-19 the Trust continued to build on the **strong underlying financial position** from previous years. This position allowed **new investments** in services and **improvements in quality** to take place against a background of low levels of financial risk.

making a

difference

together

Progress against financial plans 2018-19

- Achieved the financial plan submitted to NHS Improvement. (NHSI)
- Delivered a overall finance use of resources rating of 3, which was behind plan due to high agency expenditure. All other metrics achieved a rating of 1 (best possible rating).
- Delivered our NHSI “Control Total” which provided access to the centrally held Provider Sustainability Fund (PSF).
- Paid Public Dividend Capital Dividends as required by the Department of Health, equivalent to 3.5% of average net assets (excluding cash balances).

making a

difference

together

Key Financial Statements

- Against a national context of challenging NHS Finances the NHS Provider sector delivered an aggregate **deficit** of £571m.
- The Trust delivered an Income and Expenditure **surplus** of £58.4m. This included the following material non recurrent items
 - Building impairments (estate valuation) £-43.7m
 - PFI unwinding of liabilities £59.5m
 - Provider sustainability fund (PSF) gain £32.3m
- Excluding these non recurrent items (not included in original plan) the Trust surplus was £10.3m, which was £0.4m ahead of plan.

Key Financial Statements

- The Trust was awarded £37.0m of PSF incentive funding (broken down in the table below), and this additional cash will be used to support our future Capital programme.

	£000
Opening PSF plan	2,663
£2 for £1 increase agreed in October NHS plan re-submission	2,000
Agreed PSF plan	4,663
<hr/>	
Additional PSF	
Incentive PSF (finance)	29,909
Incentive PSF (general distribution)	1,218
Incentive PSF (bonus)	1,161
Total Additional PSF	32,288
Total PSF Received	36,951

- The Trust's surplus equated to 15.0% of Turnover (page 240). Excluding material non recurrent items the Trust achieved 2.7%
- Total Assets employed at 31 March 2019 were £192.3m which increased by £52.6m from 31 March 2018 (page 241) mainly due to the underlying Trust surplus.

Income

- Income for the financial year 2018-19 was £388.3m which was £38.0m higher than 2017-18.
- This increase related mainly to:
 - PSF awarded, which was £30.4m higher than 2017-18
 - pay award funding of £3.7m
 - additional clinical contract income received in year, mainly related to Offender Health (Haverigg Prison) and community services (perinatal, CAMHS, forensic and LD).
- Trust income was predominantly from contracts with Clinical Commissioning Groups, with 86.1% of total income relating to provision of clinical services (excluding PSF this equals 95.2%).

Expenditure

- A 1.9% consolidated pay award was given to employees on agenda for change during 2018-19.
- Employee expenditure levels increased from 2017-18 mainly due to the pay award and investment in new services Offender Health (Haverigg Prison) and community services (Perinatal, CAMHS, Forensic and LD).
- Non pay expenditure increased £4.4m from 2017-18 mainly due to:
 - Increased impairments £2.4m
 - Increased depreciation (RICS) £0.9m
 - IT equipment enabling expenditure £1.1m
- 79% of operating expenses are due to staff expenditure (excluding impairments).

Statement of Financial Position

- The value of the Trust's Property Plant and Equipment (PPE) decreased by £36.7m due to building impairments.
- The Trust's working capital position improved to a net current asset position of £46.1m.

Current Assets	49.0
Cash	72.7
Current Liabilities	(45.7)
Net Assets	76.1

- Cash balances increased by £14.3m to £72.7m due to the underlying surplus and working capital variations, offset by capital additions.

Charitable Funds

- The Trust manages Charitable Funds on behalf of the services it provides.
- The closing balance of the Trusts Charitable funds was £0.4m. These are used for a variety of purposes e.g. Social activities for patients, equipment purchases, and environmental improvements.
- The Trust is working with Smile Foundation, to optimise the use of our charitable funds, and maximise the resources available to the fund.
- On behalf of the Resources Committee I would like to thank everybody who has raised or donated money over the last year.
- If anybody wishes to know more about accessing funds or raising money, please contact John Chapman at the Flatts Lane Centre.

making a

difference

together

Financial Planning

- The current UK economic position and forecasts for public sector expenditure from 2019 will present significant challenges to all public sector bodies.
- The NHS is required to deliver minimum efficiency gains of 1.1% in 2019-20.
- Our current financial planning assumptions reflect the current environment, and we continue to work with our local Commissioners to manage finances across the local health economy.

making a

difference

together

ANNUAL AUDIT LETTER

Annual Members Meeting

17 July 2019

Tees, Esk and Wear Valleys 
NHS Foundation Trust



WHAT I'M GOING TO COVER

Our **Annual Audit Letter** summarises the key messages arising from our work as the Trust's external auditor.

My presentation will cover the key messages from our Annual Audit Letter, particularly:

- What we do as the Trust's external auditor.
- What we found during our audit.

A copy of our Annual Audit Letter is included in the information you have been provided with today.

Our responsibilities as the Trust's external auditor are set out in the National Audit Office Code of Audit Practice and include:

- Giving an opinion on your accounts.
- Reviewing evidence on your arrangements to deliver economy, efficiency and effectiveness (the VfM Conclusion).
- Reviewing your Annual Governance Statement.
- Reviewing your Annual Report.
- Reporting to the National Audit Office on your consolidation schedules.



WHAT WE FOUND: OVERALL CONCLUSIONS

The overall messages from our audit are positive with all deadlines met by the Trust and ourselves:

- Although we experienced some challenges this year, the Trust's team were very cooperative during our work. We were still able to complete our work and issue an unqualified opinion by the deadline.
- Our audit identified more issues in the draft accounts than we have in previous years, which were addressed during the audit.
- We identified two areas where there is scope for the Trust to improve internal controls.
- We found no evidence that proper arrangements were not in place to secure economy, efficiency and effectiveness (the VfM Conclusion).
- Appropriate assurance was provided to the NAO on the Trust's consolidation schedules by the agreed deadline.



WHAT WE FOUND: SIGNIFICANT RISKS AND KEY AUDIT MATTERS

There were no significant findings arising from our work on our key audit matters and/or areas of significant risk in relation to:

- management override of controls; and
- revenue recognition.

We did identify some matters in relation to the valuation process, but all significant changes were agreed by management.

We also undertook work to review the basis for, and the accounting of the Trust's termination of its contract in relation to Roseberry Park in 2018/19. This included discussions with the Trust's legal advisors. Following completion of our work we concluded the approach taken by the Trust was not unreasonable and complied with requirements.

EXTERNAL ASSURANCE ON THE QUALITY REPORT

Annual Members Meeting

17 July 2019

Tees, Esk and Wear Valleys 
NHS Foundation Trust



WHAT I'M GOING TO COVER

Our **External Assurance on the Trust's Quality Report** summarises the key messages arising from our work on the Trust's Quality Report.

My presentation will cover the key messages from our work, particularly:

- What we do in relation to the Quality Report and related indicators.
- What we found during our work.

A copy of our report is included in the information you have been provided with today.

NHSI's Trust Annual Reporting Manual (ARM) and accompanying guidance requires us to review the content of the Quality Report to ensure:

- it is in line with NHSI requirements; and
- it is consistent with other information sources.

We are also required to test:

- the performance indicators mandated by NHSI; and
- another indicator from the quality report selected by Governors (the local indicator).



WHAT WE FOUND

There were no significant findings arising from our work on the Trust's Quality Report. In carrying out our work we:

- considered compliance with NHSI requirements;
- consistency with other information; and
- tested a selection of performance indicators.

We did not identify anything that suggested the Quality Report was not prepared in line with the NHSI requirements.

We did not identify anything that suggested the Quality Report was inconsistent with other information.

Based on testing of the selected indicators we did not identify any significant issues.



CONCLUDING REMARKS

The Trust has continued to take a positive and constructive approach to our audit and we wish to thank everyone for their support and co-operation during the year.

Like most of the NHS, the Trust continues to face significant financial and operational challenges for 2019/20. These reflect the continued national drive to control NHS finance whilst modernising and developing services to meet the needs of patients.

Based upon our work with the Trust to-date, we believe it has successfully met the challenge so far, and remains well placed for the future.

Any questions?

Cameron Waddell
Partner

EMAIL:
cameron.Waddell@mazars.co.uk

MOBILE: 07813 752053

KEY CONTACTS

Gareth Roberts
Senior Manager

EMAIL:
gareth.roberts@mazars.co.uk

MOBILE: 07815 879557

About Mazars

Mazars is an international, integrated and independent firm, specialising in audit, accountancy, advisory, tax and legal services. Operating in 89 countries and territories, as of 1 January 2019, the firm draws on the expertise of 23,000 professionals to assist major international groups, SMEs, private investors and public bodies at every stage in their development.



Questions on presentations

making a

difference

together



Open Floor Questions

making a

difference

together

Summary

- Prize Draw
- Evaluation
- Transport

making a

difference

together