Wirral University Teaching Hospital
NHS Foundation Trust

Annual Members' Meeting

Thursday 23 October 2025

together we will

Agenda

Wirral University Teaching Hospital
NHS Foundation Trust

• **Welcome**	Sir David Henshaw
• **Review of the Year**	Janelle Holmes
• **Report from the Council of Governors**	Sheila Hillhouse
• **Acute Frailty Services**	Maddie Haywood-Jones, Emma Hare, Julie Langton
• **Estates Improvement Journey**	Paul Mason
• **2024/25 Annual Accounts**	Mark Chidgey
• **2024/25 Auditor's Report**	Chris Brown, Azets
• **Looking Ahead**	Matthew Swanborough
• **Questions**	Sir David Henshaw

Wirral University Teaching Hospital NHS Foundation Trust

Welcome

Sir David Henshaw, Joint Chair

together we will

Review of the Year

Janelle Holmes, Joint Chief Executive

together we will

2021 – 2026 Strategy

Trust Strategy

- Developed 2021-2026 Trust Strategy and launched in January 2021
- Considers local, regional and national NHS and healthcare priorities, examined population health
- Encompasses 6 key Strategic Objectives

2021 – 2026 Enabling Strategies

Enabling Strategies

- Developed eight enabling strategies, aligning to Trust Strategy as the delivery part of the Strategic Framework
- Designed speciality level clinical service strategies and priorities

2021 – 2026 Strategy

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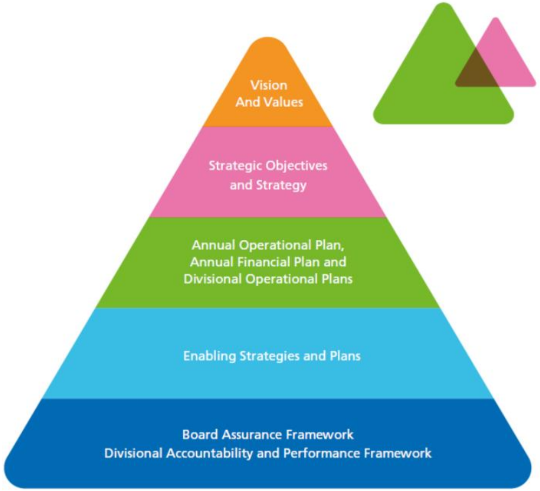
Delivery of Trust Strategy and Strategic Framework

- Focus on delivery of objectives and priorities
- Annual strategic priorities and delivery process
- Aligned to Clinical Divisions & individual goals and objectives



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Highlights of Delivery of Strategic Priorities for 2024/25

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Highlights of Delivery Across 2024/25

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OUTSTANDING CARE

- Strong progress on Same Day Emergency Care (SDEC), with significant growth in patients seen.
- Sustained improvements in patient flow, particularly reducing ambulance handover delays.
- Development of frailty services and virtual wards to support care closer to home.
- Implementation of the Patient Safety Incident Response Framework (PSIRF).Enhanced clinical audit programme, focusing on national priorities and learning.
- Quality improvements via ward accreditation, mortality review processes, and harm reviews.

together we will

Highlights of Delivery Across 2024/25

COMPASSIONATE WORKFORCE

- Substantive workforce model developed and implemented in several areas.
- Improved retention through "stay conversations" and a successful nurse preceptorship programme.
- Health and wellbeing offer enhanced with high engagement in support initiatives.
- Improved sickness absence data use to inform local action.
- Leadership development expanded, with successful aspiring leaders and team leader programmes.
- Introduction of reverse mentoring for inclusion and better understanding of lived experience.
- Strong progress on WRES/WDES actions and compassionate leadership behaviours

Highlights of Delivery Across 2024/25

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CONTINUOUS IMPROVEMENT

- Improvement faculty expanded with training in QSIR and human factors.
- Trust-wide improvement priorities embedded, with benefits realisation approach in place.
- Positive cultural shift in improvement engagement, with frontline-led projects.
- Enhanced use of SPC and data literacy training across the workforce.
- Governance and PMO functions improved for prioritisation, tracking and impact.
- Recognition at regional level for improvement work, including maternity and theatre utilisation.
- Active participation in national programmes like GIRFT and Model Hospital benchmarking

Highlights of Delivery Across 2024/25

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OUR PARTNERS

- Key role in the development of the Wirral Provider Collaborative and Place leadership.
- Better integration with primary care via virtual ward and neighbourhood teams.
- Alignment with social care partners for discharge improvement and winter planning.
- Contribution to regional urgent care improvement and mutual aid coordination.
- Improved engagement with VCFSE sector for addressing inequalities.
- Strengthened academic partnerships to support research and innovation.
- Strategic planning input into system priorities, including health inequalities and sustainability

Highlights of Delivery Across 2024/25

DIGITAL FUTURE

- Development of full business case for Electronic Patient Record (EPR), aligned with system partners
- Completion of digital maturity assessments with plans to improve infrastructure and interoperability
- Strengthened cyber security and compliance with national standards
- Expansion of virtual wards supported by remote monitoring and digital tools
- Progress on digital front door including patient portal and communication channels
- Growth in digital skills through training, champions network and workforce development initiatives
- Increased use of analytics and dashboards to drive clinical and operational decisions;

Highlights of Delivery Across 2024/25

INFRASTRUCTURE

- Capital investment used to modernise urgent care and diagnostics (notably, ED and imaging).
- Progress on estate master planning and critical infrastructure prioritisation.
- Green plan implementation underway – active travel, energy efficiency, and waste reduction.
- Optimisation of space usage, including clinical adjacencies and rationalisation of non-clinical space.
- Significant improvements in facilities management and PFI performance.

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Report from the Council of Governors

Sheila Hillhouse, Lead Public Governor

together we will

Statutory Role of the Governor

- The Health and Social Care Act 2012/2022
- Code of Governance 2022
- The Constitution of Wirral University Teaching NHS Foundation Trust
- The Council of Governors are responsible for holding the Non-Executive Directors to account
- The Council of Governors are accountable to the members who elect them and represent their views and the interests of the public

Governor Activity

Wirral University Teaching Hospital NHS Foundation Trust

- Attendance at the Patient-Led Assessments of the Care Environment (PLACE) across Arrowe Park Hospital and Clatterbridge Hospital
- Attendance at the Lead Governor meetings with NHS England across Cheshire and Merseyside
- Attendance at Council of Governors meetings, and reading/questioning the reports presented by the Non-Executive Directors

Governor Activity

- Attending the Joint Public Board of Directors and Committee to observe how the Non-Executive Directors discharge their own roles
- Participating in walkabouts across the hospital with the Board of Directors
- Joint development sessions with Wirral Community Health and Care NHS FT Governors to further enhance working together across our organisations

Governors - Changes

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Governor	Constituency
Elected	
Andrew Bradley-Gibbons	Nurses & Midwives - Arrowe Park
David Funston	Liscard & Seacombe
Ian Huntley	West Wirral
Sue Powell-Wilde	Appointed - Local Authority
Outgoing	
Paul Dixon	Oxton & Prenton
Ann Taylor	Nurses & Midwives - Arrowe Park
John Taylor-Brace	Bidston & Claughton *(Removed)*

Governors - Changes

Wirral University Teaching Hospital NHS Foundation Trust

Constituency vacancies

Constituency
Public: Oxton & Prenton
Public: Birkenhead, Rock Ferry, & Tranmere
Public: Bidston & Claughton
Appointed: University of Liverpool
Appointed: Wirral Third Sector Assembly

Membership Summary 2024/25

Wirral University Teaching Hospital NHS Foundation Trust

7,930

Public Members

6,861

Staff Members

Membership Update

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- Continued production of quarterly newsletter distributed by email to members and available on the Trust website
- Recruitment continues to improve representation
- There are no proposed changes to the policy of the composition of the Council of Governors

Work To Date and Next Steps

- Steps taken to ensure that membership is representative
- Staff – all staff are enrolled as members on appointment and may opt out if they choose
- Public – recruitment continues in underrepresented areas, and further work will be undertaken
- Governors have developed relationships across Cheshire and Merseyside as part of future system working

Trust Constitution - Changes

- During 2024/25:
  - The Trust Constitution was amended to allow WUTH to exercise joint working/joint committee powers, to support the merger via acquisition between Wirral Community Health and Care NHS Foundation Trust and Wirral University Teaching Hospital NHS Foundation Trust

Non-Executive Directors - Changes

- During 2024/25:
  - Sue Lorimer’s tenure extended for 12 months to June 2025
  - Steve Igoe’s tenure extended for 12 months to October 2025
  - Sir David Henshaw appointed Joint Chair to February 2027

Non-Executive Directors – Year to Date

- During 2025/26:
  - Sue Lorimer’s tenure extended for 12 months to June 2026
  - Steve Igoe’s tenure extended for 24 months to September 2027 and became a Joint NED
  - Lesley Davies’ reappointed for second 3-year term to May 2028 and became a Joint NED
  - Meredydd David appointed to the Board as Joint NED to June 2027
  - Chris Bentley appointed to the Board as Joint NED to January 2028
  - Haris Sultan appointed to the Board as Joint NED to June 2028

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Acute Frailty Services

Maddie Haywood-Jones, Emma Hare, Julie Langton

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Why are Acute Frailty Services needed?

- 'Acute frailty services' refer to services that identify and respond to the needs of frail, usually older people presenting to urgent and emergency care (UEC) services
- Between 5% and 10% of all those attending EDs and 30% of patients in acute medical units (AMUs) are older and frail
- Not all older people are frail but patients with moderate to severe frailty account for most issues in (e.g. falls, delirium, disability, hospital readmission and care home admission) and use of resource by older people

(NHS England)

What is an Acute Frailty Unit?

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- The Acute Frailty Unit (AFU) is an acute assessment unit focused on improving the patient experience and quality of care for our patients aged 65 years and older.
- Patients receive rapid assessment and care designed to meet individual needs. A multi-disciplinary team (MDT) working collaboratively with the aim of discharging patients within 72 hours if possible.
- The Acute Frailty Unit is comprised of Same Day Emergency Care (SDEC), frailty admissions, frailty inpatient beds and the Older Person Rapid Assessment (OPRA) clinic.
- The AFU moved to Ward 20 and has been live since 24th March 2025

Same Day Emergency Care for Frailty

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- Located on the Acute Frailty Unit (Ward 20)
- Patients identified in ED by the Specialist Nurse for Older Persons (SNOP)
- Patients with a Frailty Score of 5 or above
- Appropriate for same day discharge
- MDT approach with SNOPs, Geriatricians, Therapy and Pharmacy team co-located

Acute Frailty Unit – Pathway

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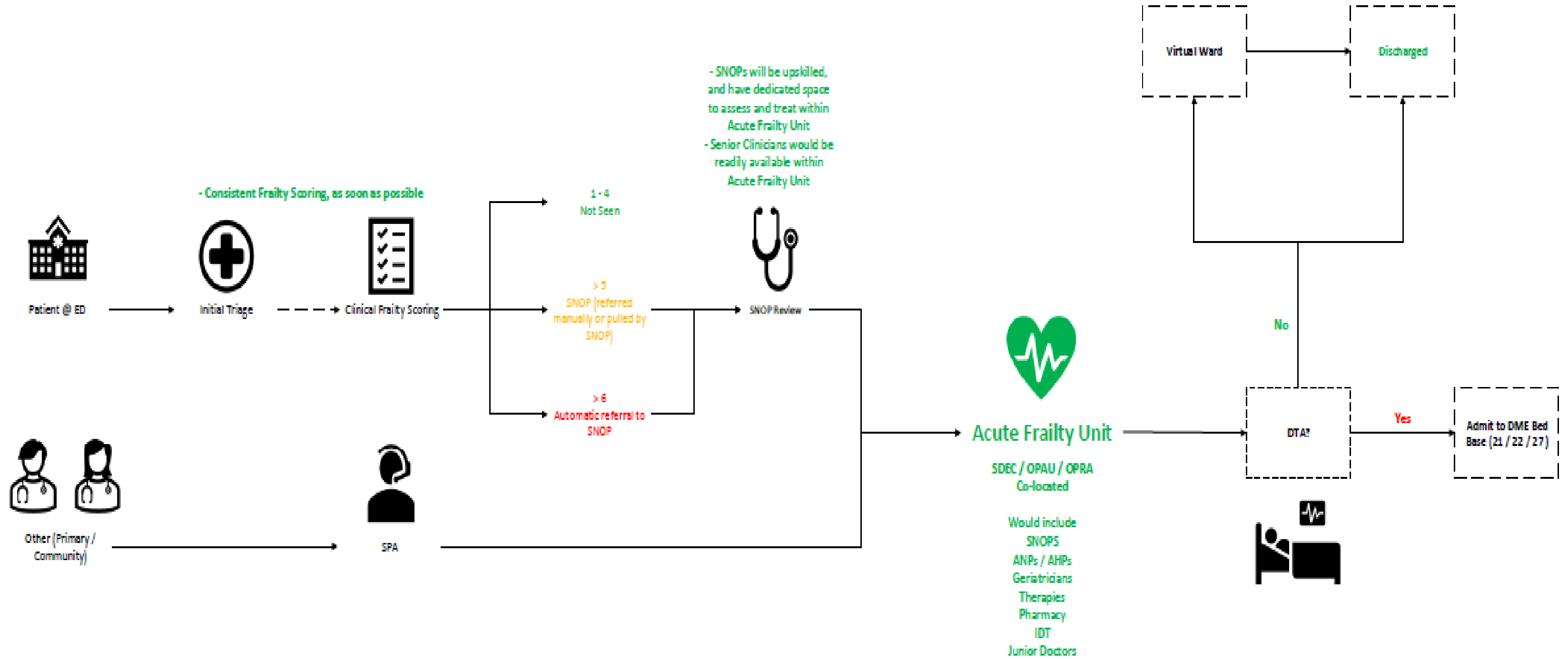
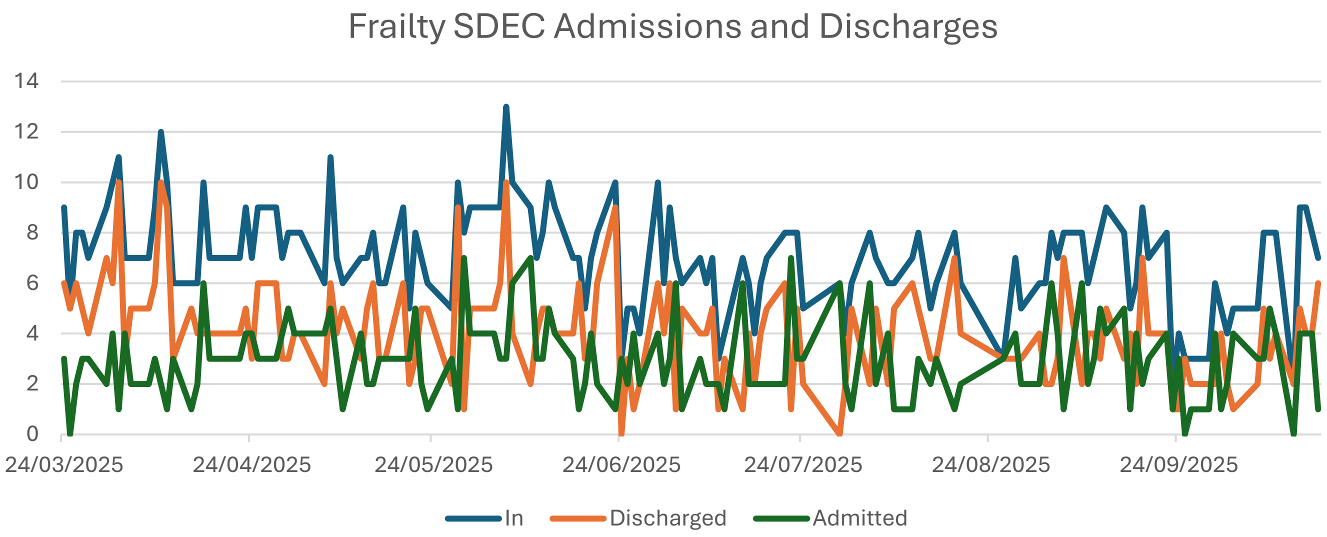
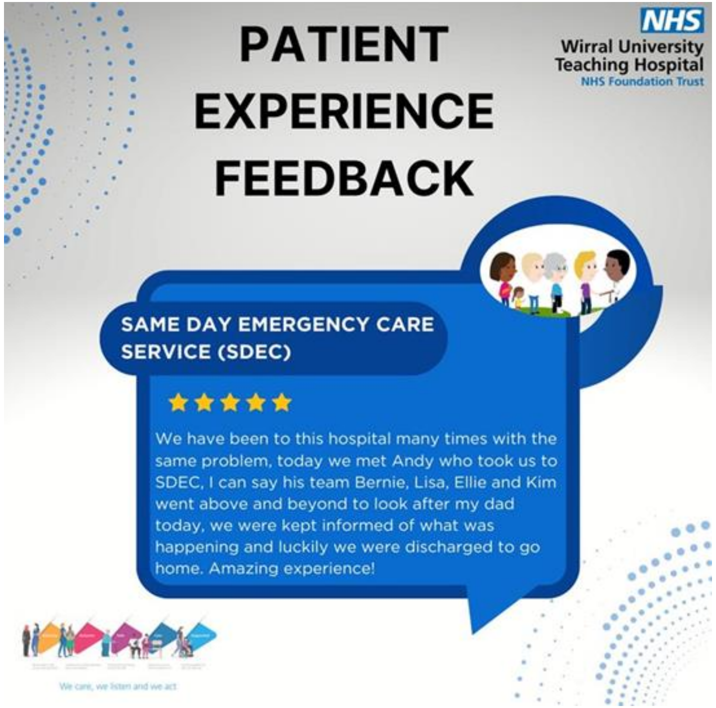


SDEC Frailty Activity

- 948 patients seen since 24th March through Frailty SDEC
- 547 of these patients went home on the same day
- 58% same day discharge rate
- Admission data includes patients ‘bedded down in SDEC’



Feedback


PATIENT EXPERIENCE FEEDBACK
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SAME DAY EMERGENCY CARE SERVICE (SDEC)
★★★★★
We have been to this hospital many times with the same problem, today we met Andy who took us to SDEC, I can say his team Bernie, Lisa, Ellie and Kim went above and beyond to look after my dad today, we were kept informed of what was happening and luckily we were discharged to go home. Amazing experience!
We care, we listen and we act

Divisional Next Steps

- Expanding the Frailty SDEC pathways and capacity – winter planning for 7-day service
- Maximising the Acute Assessment Units and Urgent Medical Assessment Unit footprint

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Estates Improvement Journey

Paul Mason

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Board Commitment

- The Estates Improvement Journey started with a Board Commitment to enhance the profile across the Trust campuses

- This presentation shows some of the key achievements and the journey to date showcasing the continued commitment to providing fit-for-purpose, safe environments for patients and staff.

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Why Change?

Not investing in estates, facilities, and capital has far-reaching consequences, impacting patient safety, staff morale, operational efficiency, and the long-term sustainability of the health service.

It creates a detrimental cycle that undermines the very purpose of the NHS.

The critical issues the Board at Wirral University Teaching Hospital wanted prevent include:

- Protecting our Patient Safety and Care Quality
- Boost Morale, Retain and Attract our People
- Prevent escalating financial costs and create efficiencies
- Enhance future development and resilience

Estates Progress

- Investing and upskilling our people
- Driving compliance and Board assurance
- Developing a single leadership
- Enhancing net zero
- Enhancing services

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Single Leadership

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- Recruitment to senior positions, approved by the Board
- Transfer and integration of Facilities and Estates functions
- Realignment of job titles, roles and responsibilities
- Introduction of structured governance meetings
- Full review and update of the Trust Risk Register
- Independent review of compliance, competencies and processes, resulting in the closure of 29 recommendations
- Appointment of an Authorising Engineer (AE)
- Commissioned audits Following the appointment OF AE/AP roles
- Preliminary external audits commissioned to assess fire management
- Improved business intelligence reporting to support strategic planning

Estates Improvements

Since the formal integration of Estates, Facilities and Capital (EF&C) in 2021, the Trust has made significant progress in improving compliance, responsiveness, sustainability, and infrastructure performance across its estate.

These improvements reflect a strategic focus on creating safer, more efficient environments that support high-quality care and enhance the experience of patients, staff, and visitors.

These are the key achievements across compliance, maintenance, energy efficiency, and sustainability.

Compliance

To ensure full statutory compliance, EF&C introduced a formal governance structure and Safety, Health, and Environment meetings. Supported by dedicated HTM reporting and external Authorising Engineers, these measures drive assurance across Decontamination, Medical Gases, Ventilation, Fire Safety, Electricity, Lifts, Water, and Facilities services including Cleaning, Waste and Catering, ensuring high standards are consistently achieved.

Reactive Maintenance

Demand for reactive maintenance has grown significantly in recent years, with work orders rising from 15,684 in 2021 to 19,766 in 2024. Despite this 26% increase, the Estates team has maintained strong Service Level Agreement (SLA) performance, particularly for priority one jobs, where urgent responses are required within a four-hour time frame. Additional resources and improved processes have supported the department in meeting this increased operational pressure effectively.

Energy and Utilities

EF&C has achieved major reductions in energy costs and consumption through effective contract management and sustainability-focused investment. Highlights include LED lighting upgrades at both sites, saving an estimated £365k annually, and use of a private water borehole, which has cut retail water costs by approximately £500k per year. Ongoing efficiency reviews and system upgrades continue to identify new opportunities for further energy and utility savings.

Sustainability

The Trust remains committed to reaching net-zero carbon emissions by 2040, as outlined in its Green Plan published in 2022. Annual progress monitoring is in place, and sustainability is increasingly embedded across operations, from estates management to clinical practice. Engagement with staff, strategic partners, and suppliers ensures environmental responsibility is a shared priority, driving long-term cultural change and more sustainable ways of working.

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Investing in Safety & Compliance

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Low Carbon Steel Replacement – 2021 - ongoing

Scheme: Replacement of degraded hospital pipework

Investment Value: £6 million (total)

Overview of the Scheme: Widespread degradation of heating and cooling pipework across the hospital, particularly in critical care areas, posed a serious risk of leaks involving scalding water or dosed chilled water. Isolation of affected pipework also led to the loss of temperature control in key patient areas.

Benefits and Impact: This major replacement programme has restored reliable heating and cooling to critical areas, including Neonatal services. It has also removed the risk of serious water leaks in clinical environments, improving safety, resilience, and patient comfort across the site. Work is ongoing to ensure long-term infrastructure stability throughout the Trust.

Fire Improvement Projects - 2024/2025

Scheme: Site-wide fire safety upgrades

Investment Value: £1.6 million

Overview of the Scheme: The Fire Improvement Project at Arrowe Park Hospital was developed to enhance fire safety and emergency resilience across the site. Key works included the installation of fire and smoke dampers, improvements to fire compartmentation, installation of new fire doors, two new fire evacuation lifts, a full fire alarm cause and effect review, and the development of a dedicated well-being hub for staff.

Benefits and Impact: The project has significantly improved fire safety across the hospital, ensuring full compliance with current fire regulations. These upgrades provide safer environments for patients, staff, and visitors, while also strengthening the hospital's long-term fire protection infrastructure and overall emergency preparedness.

Investing Clinical Care

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Critical Care (HDU) – 2020/2021

Scheme: Refurbishment of the existing High Dependency Unit (HDU)

Investment Value: £1.8 million

Overview of the Scheme: This project involved the full refurbishment of WUTH's existing HDU to deliver six new HTM-compliant patient isolation rooms. Each room was designed with high-spec clinical functionality and patient comfort in mind, featuring fully compliant Draeger medical pendants, medical gas outlets, negative pressure ventilation, and handwashing facilities. To support patient wellbeing, each room also included a digital skylight, offering a calming and therapeutic visual element.

Benefits and Impact: The previous unit no longer met modern clinical standards. This refurbishment delivered larger patient spaces, improved infection control, and enabled staff to monitor patients without entering rooms, enhancing safety and efficiency. The upgraded layout also improved workflow for clinical teams, created a more comfortable environment for patients, and supported better compliance with national care standards.

ED Majors - 2020/2021

Scheme: Redevelopment of Emergency Department trolley area

Investment Value: £1.7 million

Overview of the Scheme: In response to the COVID-19 pandemic, the Trust urgently redeveloped an existing trolley area into a dedicated red majors unit for COVID-positive inpatients. The project delivered eight fully enclosed isolation cubicles, completed at pace, from concept to completion, in just 14 weeks.

Benefits and Impact: The new red majors unit provided vital isolation capacity within the Emergency Department at a time of unprecedented demand. It enabled the safe management of high-risk COVID-19 cases, significantly reducing the risk of transmission to other patients and staff. This rapid development supported safer patient flow, improved infection control, and enhanced the Trust's ability to respond effectively during the height of the pandemic.

Investing in Clinical Care

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GUM and TOE - 2022/2023

Scheme: Refurbishment of ward space for Day Case and Transoesophageal Echocardiogram (TOE) services.

Investment Value: £1.97 million

Overview of the Scheme: This scheme involved the full refurbishment of an existing ward to create a new Day Case unit for ambulatory care. On the third floor, underused rooms were also repurposed to house a dedicated Transoesophageal Echocardiogram (TOE) procedure room.

Benefits and Impact: The Day Case facility has increased the number of patients that can be treated at one time, offering both bedded and seated treatment options based on patient needs. The creation of the TOE room brought a previously unused space into clinical use, supporting improved diagnostic capacity and better use of estate resources.

Clatterbridge Theatres - 2022/2023

Scheme: Installation of four modular theatres.

Investment Value: £25 million (total)

Overview of the Scheme: To expand surgical capacity, four new modular theatres were added to the existing six on-site, bringing the total to ten. Each theatre is modern, fully equipped for multi-specialty use, and supported by first-stage recovery bays, clean and dirty utility rooms, staff changing and rest areas, and dedicated storage to support all four theatres.

Benefits and Impact: The additional theatres have significantly increased surgical capacity, enabling a higher volume of procedures to be carried out. Improved recovery spaces and supporting facilities have enhanced patient flow, reduced waiting times, and improved the working environment for clinical teams.

Investing in Clinical Care

Wirral University Teaching Hospital
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Emergency Department Upgrade - 2026

Scheme: Urgent and Emergency Care Upgrade Programme (UECUP)

Investment Value: £35 million

Overview of the Scheme: Established in 2020, UECUP is a multi-phase redevelopment programme, part new build, part refurbishment, designed to transform the delivery of urgent and emergency care at Arrowe Park Hospital. Supported by national capital funding, the programme aligns with the ICB's ambition to modernise urgent care across Wirral. Driven by clinical priorities, the scheme will create a safe, compliant, high-quality environment for patients and staff. It aims to deliver a collaborative hub and centre of excellence, a single accessible model of care, and efficient patient streaming with seamless access to specialist support. With three of four phases now complete, including the successful delivery of Phase 3 in 2025, the project continues to improve the estate and service provision.

Benefits and Impact: UECUP is designed to improve clinical outcomes, enhance the quality and safety of care, and create a better environment for patients and staff alike.

Efficiency

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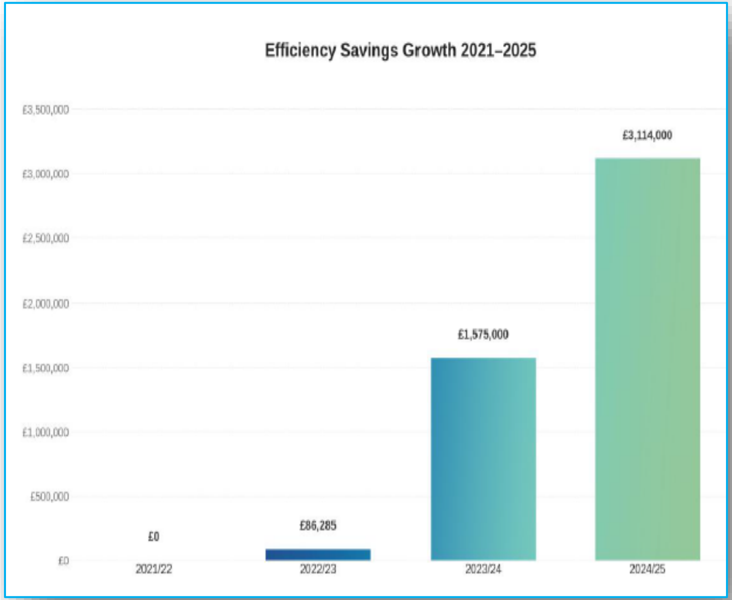
Between 2021 and 2025, the Estates, Facilities and Capital (EF&C) team has delivered an impressive £4.7 million in recurrent revenue efficiencies, all while continuing to modernise the estate, improve standards, and enhance the experience for patients, staff, and visitors.

This efficiency journey began with foundational work in 2021/22, Followed by a modest saving of £86,285 in 2022/23. These early efforts laid the groundwork for transformational change, culminating in £1.575 million saved in 2023/24, and a significant rise to £3.114 million in 2024/25.

These savings have been realised through a combination of smarter procurement, tighter energy contract management, investment in infrastructure (such as LED lighting and heating systems), and improved reactive maintenance planning.

Every pound saved has been reinvested into frontline services, helping to reduce operational pressure and future-proof the estate.

Beyond the financial benefit, these efficiencies support a safer, more sustainable hospital environment, strengthening statutory compliance, reducing our carbon Footprint, and improving resilience across both Arrowe Park and Clatterbridge sites.



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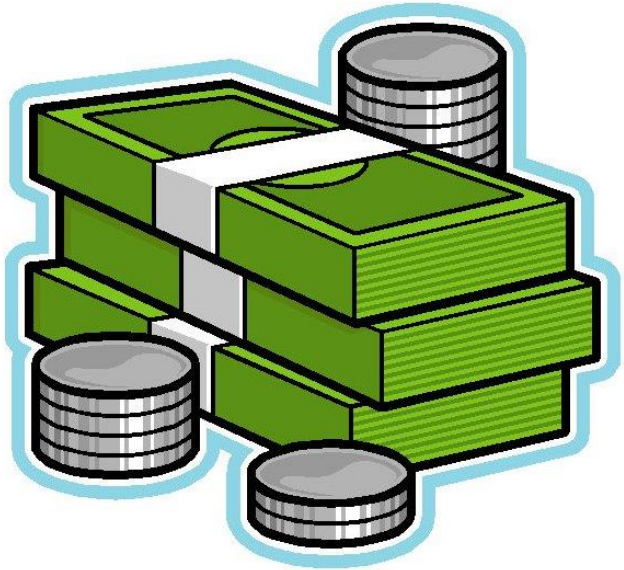
2024/25 Annual Accounts

Mark Chidgey, Chief Finance Officer

together we will

Financial Headlines: 2024/25 in numbers

- Delivered **£26.9m** of productivity/cost improvements.
- The Trust planned for an operating deficit of **£6.6m**. Actual outturn was a deficit of **£9.7m**.
- Actual operating position was a deficit of **£15.6m** (this includes the impact of impairments).
- Capital Investment of **£22.4m** in our Estate, Infrastructure and Critical Equipment.
- **£0** cash balance at the end of the year.



Total Income - £539.5m

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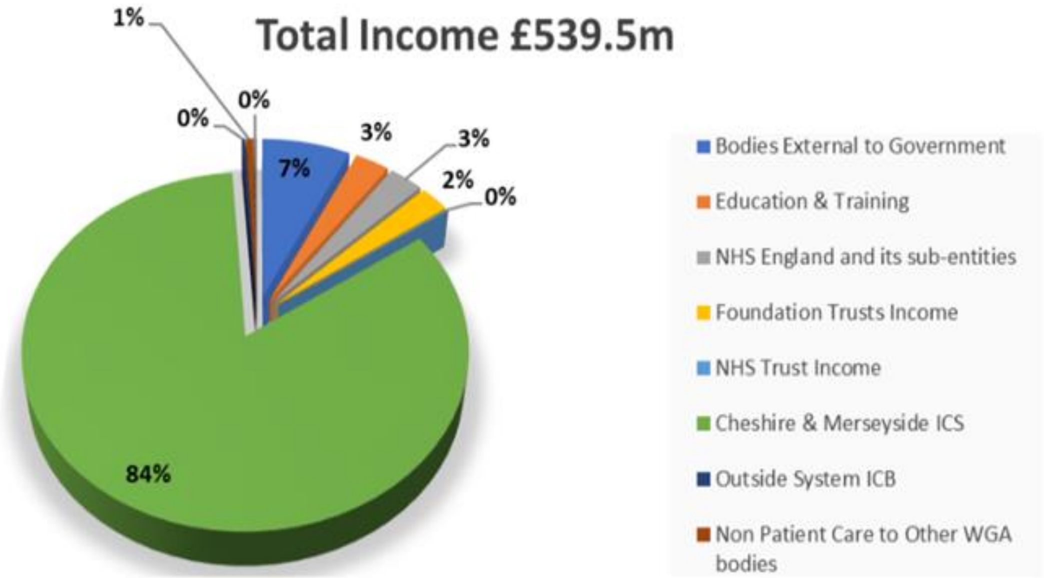
84% of Trust income is from C&M ICB



Total Expenditure - £556.3m

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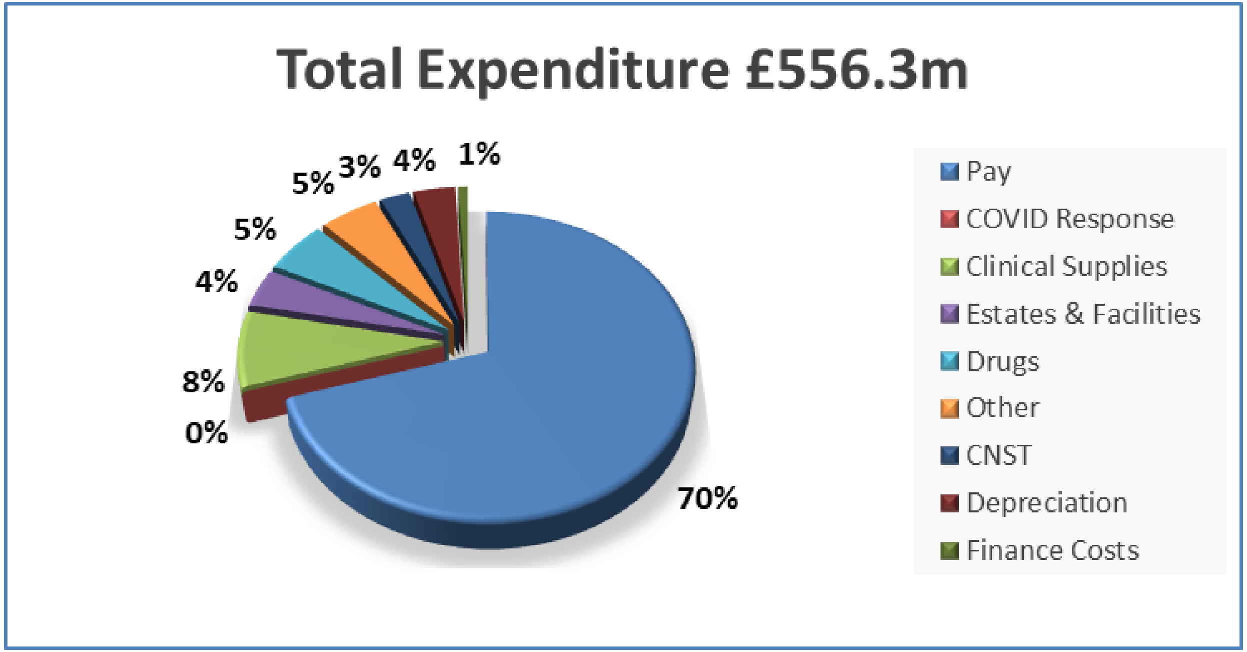
70% of Trust expenditure is pay.



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Forward look to 2025/26…

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Finance Regime 2025/26

- Cost improvement target of **8.8%** of operating costs **(£46.1m).**
- Planned productivity increase **4%.**
- Planned deficit of **£5.2m.**
- Finance review of highest risk systems includes C&M ICS.

Capital Programme 2025/26

- **Three-year capital programme approved**
- **£26m** programme to enhance patient environment and replace critical equipment. Including:
  - £7.8m UECUP
  - £6.8m Estates infrastructure improvement including Aseptics
  - £8.4m Operational delivery (inc. Medical equipment)
  - £1.1m Neonates refurbishment, funded by the Charity
  - £0.8m Investment in Information Technology.
  - £0.5m on solar initiatives
  - £0.6m other

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2024/25 Auditor's Report

Chris Brown, Azets

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Wirral University Teaching Hospital NHS Foundation Trust

Annual Members' Meeting

23 October 2025

Summary of Auditor's Annual Report 2024/25

Chris Brown, Partner, Azets

AZETS

Auditor’s responsibilities

NAO

National Audit Office

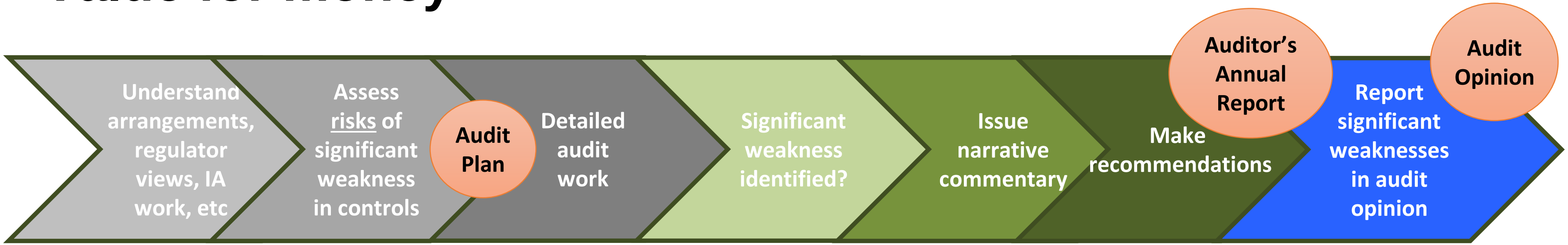
Code of Audit Practice

- Annual report and accounts
- Value for money commentary
- Public interest reporting

Summary of audit opinions and findings

	Findings
Annual report and accounts	• Audit Findings Report issued to Audit and Risk Committee on 16 June 2025 • Unqualified audit opinion • Trust prepared high quality draft accounts and working papers by deadline • Accounts submitted to NHS England by deadline of 30 June 2025
Public interest report	• No report necessary

Value for money



Reporting criteria	Significant weaknesses?	Key recommendations?	Other recommendations?
Financial sustainability How the body plans and manages its resources to ensure it can continue to deliver its services	No	No	Yes
Governance How the body ensures it makes informed decisions and properly manages risk	No	No	No
Improving economy, efficiency and effectiveness How the body uses information about its costs and performance to improve the way it manages and delivers services	No	No	No

Value for money commentary

VFM area	Findings
Financial sustainability	• Operational deficit £9.7m, planned deficit £6.6m (2024 - £24m) • CIP achieved £28.8m, planned £26m (2024 - £26m) • Cash at 31 March 2025 £86,000 • CIP target for 2025/26 - £32m • Medium Term Financial Plan required for ongoing sustainability
Governance	• Improvements to risk management • Substantial assurance from internal audit • Cyber incident
Improving economy, efficiency and effectiveness	• Operational pressures continue • Waiting lists increasing • Integration with WCHC progressing at pace

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Looking Ahead – WCHC and WUTH Integration

Matthew Swanborough, Interim Joint Chief Strategy Officer

Approach to Wirral System Review

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- In March 2024, Cheshire and Merseyside Integrated Care Board (C&M ICB) commissioned an independent review of collaboration and integration opportunities across NHS provider services on Wirral.

- Value Circle LLP were commissioned by C&M ICB to undertake the review and deliver across two phases, with completion in September 2024, working with Wirral NHS providers.

thevaluecircle

Change makers
Value creators
Code breakers

Wirral System Review: Phase Two Report

Proposed model for collaboration and integration

11th September 2024

FINAL DRAFT

Wirral System Review Recommendations

NHS Wirral Community Health and Care NHS Foundation Trust

NHS Wirral University Teaching Hospital NHS Foundation Trust

Value Circle Phase 1 Report Recommendations

- The Phase 1 Report focused on understanding the key opportunities of collaboration and integration across Wirral NHS providers, with a particular attention to a number of identified clinical pathways.
- The report identified a number of gaps in effective collaboration between NHS provider organisations on Wirral and made a number of of key integration and improvement recommendations.
- This included Unscheduled Care, Neuro-diverse pathways, Ophthalmology, cardio-vascular disease, corporate functions and neighbourhood services.

Phase 2 Report Recommendations

- The Phase 2 engagement built on the Phase 1 recommendations, with a focus on describing the options for integration between WCHC and WUTH as well as recommending a high-level roadmap for implementation.
- This included:
    - The appointment of Joint Chair and a Joint Chief Executive Officer (CEO).
    - The Joint Chair and Joint Chief Executive identify senior leadership posts that align and would be suitable for joint appointments.
    - The establishment of an Integrated Programme/Management Board to oversee integration between WCHC and WUTH.
    - Further review and development of the Place governance arrangements in Wirral.

Wirral System Review Benefits

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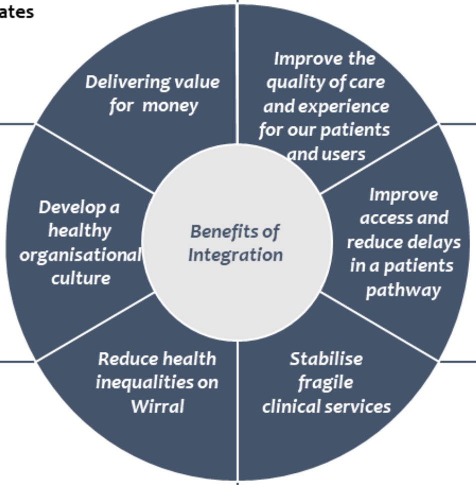
Identified benefits from the Wirral System Review

- The Wirral System Review Phase 1 and Phase 2 Reports also identified a range of benefits from integration between WCHC and WUTH.

- Reducing overhead costs
- Increasing utilisation of estates and delivering sustainable estate
- Leveraging scale through buying and procurement

- Provide seamless care between community and secondary care services
- Reduce handovers between teams and services



- Provide extended opportunities for development and progression
- Improve retention and recruitment
- Allow for different ways of working for staff

- Reduce waiting times across the patient pathway
- Ensure that patients are treated in the right setting and location

- Provide targeted services and service locations to actively address deprivation and health inequalities across Wirral
- Lead system working with NHS and Council partners

- Enhance clinical services through economies of scale
- Reduce duplication in clinical service provision

Progress since the Wirral System Review: 100 Working Day Integration Plan

NHS Wirral Community Health and Care NHS Foundation Trust

NHS Wirral University Teaching Hospital NHS Foundation Trust

Joint Appointments

- The WCHC Council of Governors approved the appointment of the WUTH Chair as the Joint Chair across WCHC and WUTH in October 2024.
- The WCHC Board approving the appointment of the WUTH Chief Executive as the Joint Chief Executive across WCHC and WUTH in November 2024.

Initial Approach to Integration

- To support the initial stages of integration and accelerate the joint working between WCHC and WUTH, an initial 100 Working Day Integration Plan was then developed and enacted for the period: 15th November 2024 to 1st April 2025.

- To support this delivery and hold directors to account, the Integration Management Group was established between the Trusts, which includes membership from WCHC and WUTH Executive Teams.

100 Day Integration Plan Programme Areas

- Governance
- Clinical Services
- Corporate Functions
- Finance
- Workforce and Culture
- Communication and Engagement
- Estates

Progress since the Wirral System Review: 100 Working Day Plan

Wirral Community Health and Care NHS Foundation Trust

Wirral University Teaching Hospital NHS Foundation Trust

Key deliverables across the first 100 Working Days Integration Plan

- Across the first 100 working days, the Trusts made significant progress in the initial stages of integration delivery This included:
  - The joint appointments to identified Executive Director and Non-Executive Director roles across WCHC and WUTH
  - The development and implementation of a Management Agreement between WCHC and WUTH for integration
  - The establishment of the Integration Management Board (with delegated authority as a Joint Committee) and associated governance arrangements
  - The review and prioritisation of clinical services for integration as well as the early delivery of service integration (Urgent Care, Ophthalmology, MSK)
  - The examination of corporate integration models and determination of approach to corporate functions integration
  - The development of a communication and engagement plan and delivery of staff and stakeholder engagement
  - The review of estates and understanding of estate ownership, occupancy and usage across WCHC

Two Year Integration Plan

NHS Wirral Community Health and Care NHS Foundation Trust

NHS Wirral University Teaching Hospital NHS Foundation Trust

Two Year Integration Plan

- Following the conclusion of the 100 Working Day Integration Plan in April 2025, a longer term integration plan was developed, setting the strategic intentions for WCHC and WUTH on integration and a pathway towards becoming a single organisation.

- This plan included four main components:
  - The development of a Joint Strategy for WCHC and WUTH
  - A Transaction approach between WCHC and WUTH
  - Integrating governance arrangements
  - Continued delivery of Integration Programme work areas

	Work Area	Key Components (25/26-26/27)
Strategy and Transaction	Joint WCHC and WUTH Strategy	• Review of existing strategic frameworks across Trusts • Development of new Strategic approach • Stakeholder engagement and analysis • Joint Strategy development and finalisation • Development of Enabling Strategies
	Transaction	• Examination of organisational forms/transaction models • Strategic Case Development and approvals • Full Business Case development and approvals • New Trust commencement • Post Transaction Implementation Plan
Integration Delivery	WCHC and WUTH Governance	• Commencement of Integration Management Board and joint Programme Board • Identified joint appointments • Aligned Board and Committee meetings • Joint Trusts' Development Sessions • Post Transaction organisational form and structures
	Continuation of 100 Day Integration Plan Work areas: • Clinical Services • Corporate Functions • Finance • Workforce and Culture • Digital • Estates • Communication and Engagement	• Assess and deliver integration across identified clinical services • Integration of corporate functions and hosting arrangements • Assessing Lead Provider models and tracking delivery of financial benefits from Integration • Delivering organisational development plans • Reduce estates footprints and shifting care into community settings

Longer Term Plan for Integration: transaction approach

Wirral Community Health and Care NHS Foundation Trust

Wirral University Teaching Hospital NHS Foundation Trust

- In April 2025, the Trusts examined the future organisational forms for WCHC and WUTH, with the Trust Boards approving the move to a single organisation, through an NHSE transaction process.

- It was noted that the transaction process would take time, with a number of stages including the development of the Strategic Outline Case (SOC) and Full Business Cases (FBC).

- As part of this process, the Trusts set out a proposed timeline for the transaction, with an aim to commence as a new Foundation Trust by Q1 (April-June) 2027/28.

1. ***Transaction Set up***
   June - September 2025
   (Q1-2 25/26)
2. **Strategic Case Development**
   October 2025-March 2026
   (Q3-4 25/26)
3. **Strategic Case Approvals/FBC**
   April– September 2026
   (Q1-2 26/27)
4. **Full Business Case and DD**
   October 2026 – March 2027
   (Q3-4 26/27)
5. **FBC Approval/PTIP/Go Live**
   April – June 2027
   (Q1-2 27/28)

Next steps for Integration

Next steps

- In line with the WCHC/WUTH Transaction timeframes, the Trusts will now commence the development of the Strategic Outline Case, following the appointment of support to write the business cases.
- The Trusts will also continue to deliver on the Two Year Integration Plan, focussing across:
    - Service Integration – MSK, Cardiology, Urgent Care, Ophthalmology, CICC, Therapies
    - Workforce
    - Corporate Functions
    - Digital
    - Estates
    - Communication and Engagement
- In addition, the Joint WCHC/WUTH Strategy is in development, with an aim to be finalised and approved by April 2026.
- The Trusts have also worked with Place to revise Place Governance and establish the Wirral Provider Alliance

Questions