

# Annual Report

2003/04

## Annual Report 2003/04

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## Introduction

Welcome to our report for April 2003 to March 2004.

### The Hospitals of Choice

Ashford and St Peter's Hospitals are aiming to become hospitals of choice; providing the best possible services to local people, offering the best possible choice of services.

Ashford and St Peter's Hospitals NHS Trust operates as one hospital service across two sites. This provides patients in many areas with choices about which site they attend for their outpatient appointments and follow-up appointments. It means that patients requiring in-patient treatment can be treated, where practical, in the hospital nearest to their home – easier for relatives and friends to visit.

In this annual report, we focus on the choices patients, visitors and staff have about our:

- Hospitals
- Clinicians
- Food
- Entertainment
- Information
- Involvement
- Transport
- Careers
- Training
- Support

We also look at what your two local hospitals have been doing over the past year and where we stand on major government initiatives such as the NHS Plan, infection control and many others.

### Star Ratings

We are delighted with our two stars awarded by the Healthcare Commission in the 2004 NHS star ratings. This is down to the dedication and hard work of our staff and volunteers that we have maintained and improved on our two star ranking. We narrowly missed three stars but last year was the first of two tough years for the Trust and we have proved, with nine out of nine key target areas achieved, that we can deliver.

### Investment into Services

During the last couple of years, we have invested £1.4m in refurbishing our maternity services, £1.5m in pathology services, £2.5m in a new heating system at St Peter's and £1.5m on a new operating theatre at Ashford. Alongside housing, childcare and other developments designed to improve the working lives of staff, we have made real improvements to the local NHS for the benefit of patients and staff. This is a very strong performance by staff who are now confident and forward looking.

### Choose and Book

As we implement the "Choose and Book" programme over the autumn, we will be giving patients the choice of hospital, date and time for their appointments through their GP and this will bring further improvements for patients. Over the next two years as we implement the reconfiguration plans, develop the Orthopaedic Treatment Centre at Ashford, and make changes to the way we work, we will make even more improvements that will benefit both patients and staff.

### Working with the Local Health Community

As a Trust, we have made significant improvements over the last three years. We are now a successful medium-sized acute hospital Trust providing services across two sites. Two site working does bring complications and that is why we held public consultations earlier this year with the Primary Care Trusts on making changes to our services. Not only will the recently agreed changes improve services for patients and staff, they will also enable us to improve our star rating in the future. We work closely with our neighbouring PCTs and Trusts as well as the Borough and County Councils. It is only through good partnership working that we are able to make progress towards providing 21<sup>st</sup> century healthcare that our patients, visitors and staff expect and deserve.

**Clive Thompson CBE, Chairman**

**Glenn Douglas, Chief Executive**

## Corporate Objectives 2004/05

- **Delivering transformational change** to ensure that all patients receive the right care at the right time, in the right place, and to improve the experience of patients.
- **Establishing a service vision** by reviewing what the Trust is providing now and will need to provide in the future, in the context of a changing health and social care environment.
- **Developing a responsible and accountable culture** by implementing a scheme of delegation and self sufficient and supportive teams.
- **Strengthening the market position** through developing and implementing a marketing strategy, improving patient and public perception, and maximising the opportunities presented by increasing Patient Choice.
- **Developing service specific objectives** by setting the direction for elderly care, ophthalmology and ENT, establishing a sub-acute rehabilitation model of care at Ashford Hospital, and improving day case rates.
- **Achieving financial balance** through reducing unnecessary spend and improving efficiency.
- **Adopting new ways of working** to meet the European Working Time Directive (EWTD), using Agenda for Change and the Consultant Contract to redesign roles and change working practices.

## Choice of Hospital

Ashford and St Peter's Hospitals NHS Trust covers a catchment area including the Boroughs of Runnymede, Spelthorne, Woking and parts of Elmbridge, Houslow, and Surrey Heath.

The Trust provides the full range of general and acute clinical services across the two hospital sites, to a population of approximately 400,000 in north west Surrey and outer south west London. The Trust provides services to non-local users due to the proximity of Heathrow airport, motorways and local trunk roads.

Geographically, Ashford and St Peter's are well placed to serve this catchment area. In our view, the local population gets the best of both worlds – hospitals close enough to their home to enable them to have outpatient and follow-up appointments at their nearest hospital whilst specialist treatment, sometimes requiring a stay in hospital, is only a few miles from either end of the catchment area.

The Trust also provides specialised services in orthopaedics and cardiology to patients from across the United Kingdom. Services for morbid obesity will be developed during 2004/05.

### Not just at Ashford and St Peter's

In addition to services provided from the Ashford and St Peter's hospital sites, clinical staff from the Trust run clinics for some specialties in locations across the area including:

- Egham,
- Princess Alice Hospice,
- Teddington,
- Sheerwater,
- Staines,
- Sunbury,
- Walton,
- West Byfleet,
- Weybridge,
- White Lodge, and
- Woking,

We also work in partnership with other Trusts at their hospital sites.

## Choice of Clinician

Except for the most specialist treatment our clinicians work in teams. We put patients onto the waiting lists in rotation but you can make a choice of which clinician to see if you have a preference. This will be made easier when "Choose and Book" is introduced.

### Consultant Profiles

Information about our clinicians can be found by looking at the webpages at:  
<http://www.ashfordstpeters.nhs.uk/intranet/Ashford---/Our-Servic/Consultant/index.htm>

You can select the clinicians either from an alphabetical list or according to speciality.

### Dr Foster

Further information about our Trust, our services and Consultants is held by the Dr Foster organisation on the website at:  
<http://www.drfooster.co.uk/ghg/>

### Ultrasound Scanning

Ashford and St Peter's is one of only 14 Trusts nationwide to be training doctors to undertake ultrasounds. This means that rather than being referred for an ultrasound after an initial consultation, involving in some cases waiting for weeks, patients at Ashford and St Peter's could in future have their ultrasound done by the doctor or consultant and given an immediate opinion.

Ultrasound scanning has proved very successful in looking into solid tissue organs such as kidneys, liver, testicles, and fluid containing structures such as the bladder. The Ultrasound scanning can easily detect abnormalities and tumours including cancer. If the scan is done on the first consultation, it is hoped that more patients will be correctly diagnosed sooner. While such a consultation may take a little longer than without the scan, it may well negate the need for a second visit, which will save time and money in the long run.

### Remote Pacemaker Monitoring

Ashford and St Peter's Hospitals NHS Trust pioneered a new style of pacemaker when Consultant Cardiologist Dr David Fluck fitted the new "Biotronik Philos II Dr-T" pacemaker with remote technology to a patient at St Peter's Hospital. This was the first time this new pacemaker has been fitted to a patient in Britain and it is hoped that it will help with the after care of patients by allowing monitoring of the device to be done remotely.

The new wireless technology in the pacemaker enables it to automatically communicate with a remote relay unit. The Monitoring unit acts much like a mobile phone and receives a signal from the implanted pacemaker every day during the night. The monitoring unit then sends all of the information to a central hub in Germany, where it is then forwarded to the relevant hospital. In this case, the information is emailed to St Peter's Hospital. This means that the patients do not have to come in for outpatient appointments to monitor their progress and it allows patients fitted with the device to lead an even more normal life.

### "Little Oaks" Paediatric Cancer Care

Working in partnership with the local community and The Royal Marsden, the "Little Oaks" Paediatric Oncology Shared Care Unit has been developed and opened to children who receive their treatment for cancer at The Royal Marsden to receive on-going care and follow-up nearer to their home. This removes the burden on the children and their patients of long journeys to The Marsden.

Little Oaks provides Day Unit facilities in the area adjacent to Oak Ward which has many other children visiting it. A separate area, such as a "Little Oaks", for oncology patients reduces the possibility of cross infection for children whose immune system has been affected by treatment.

### **Orthopaedics at the Trust**

Orthopaedic services at Ashford and St Peter's Hospitals have been shown to perform well by independent healthcare analysts Dr Foster, in their guide to Orthopaedic Consultants.

Published in The Times, the guide shows that our:

- hip replacement readmission rates are 36 points lower than the national average
- knee replacement readmission rates are 16 points below the national average
- standard mortality ratio for hip fractures in the elderly is only 3 points off the national average
- only 17% of patients waited longer than two days for their operation following admission through A&E.

## Choice at the Point of Booking

If you need an appointment to see a consultant at Ashford and St Peter's hospitals either you are invited to telephone our appointments centre or the centre rings you to offer a date, time and, where possible, a choice of hospital. Eighty per cent of our patients are contacted in this way. This helps to reduce the number of people who do not attend appointments. However, this is still a problem and we would like to reduce "do not attends" (or "DNAs") further. A new development – "Choose and Book" – will take this one step further.

### Choose and Book

Ashford and St Peter's are implementing "Choose and Book" and leading the way for Surrey and Sussex Strategic Health Authority and the whole of the southern area. We are doing this in collaboration with local GP practices in the North Surrey and Surrey Heath and Woking Primary Care Trust areas.

If your GP decides that you need to see a specialist, you will be able to choose the hospital from a list and then book an appointment. Your GP, or one of the practice team, will take you through the options available to you.

You can select a date and time, and book your appointment before you leave the GP practice. You will be given an appointment confirmation slip with the date, time, hospital of your choice and your reference number. If you want to check with work, family and/or friends before booking your appointment you can book your appointment later either by telephone or on the internet. For this you will need a password agreed with your GP and reference number, given to you at the surgery, ready when you book or change your appointment.

Whilst this facility will only be available in a limited number of practices and for a limited number of specialities in early Autumn 2004, we expect it will be available across all practices and specialties by early 2005. By the end of 2005, you will be able to choose from a menu of four or five hospitals.

Further information can be found at: [www.chooseandbook.nhs.uk](http://www.chooseandbook.nhs.uk)

## Choice of Food

Patients are provided with a wide choice of food during their stay with us. Patients can access the latest menus via their bedside terminals at:

<http://www.ashfordstpeters.nhs.uk/intranet/Ashford---/Coming-Int/Patient-Me/index.htm>

With a new two weekly menu cycle; for lunch there is a choice of four hot main meal dishes and a salad; for supper, three hot dishes, a salad and two types of sandwich.

## Meal Improvements

There have been a number of recent improvements to the food served at Ashford and St Peter's Hospitals including:

- **Temperature** – plates are now warmed in ward ovens and extra power sockets have been installed so that food trolleys are continually heated while they are in each bay of every ward.
- **Distribution of meals** – protected meal times have been introduced on some wards when all other medical and non-medical activity is discouraged unless essential.
- **Meal trays** – are now colour-coded so that staff can see at a glance who needs help, e.g. a meal on a red tray means that a patient cannot manage on their own.
- **Menus** – the new menu booklet and colourful picture menu cards for those unable to read enables patients and their relatives to have advance knowledge of the next days meals. A special children's menu has been introduced on children's wards.
- **Menu changes** – some meals, found to be too spicy, particularly one chicken dish, have been dropped. The range of pureed meals has been increased and salads are available every day.
- **Lite bites** – for example, cake is now offered to patients with their night time beverage.
- **Missed meals** – snack packs are available 24 hours a day for patients who have missed a meal.

## Cafes, Restaurants and Vending Facilities

For more information about the location and opening hours of the food service at the two sites, please visit:

<http://www.ashfordstpeters.nhs.uk/intranet/Ashford---/A-to-Z-of-/Cafes-and-/index.htm>

Ashford Hospital also benefits from being close to a large Tesco's supermarket, which has a café. A pub/restaurant can be found just across the A30. At St Peter's Hospital, you are never more than a few minutes drive from shops, pubs and restaurants.

## Choice of Entertainment

Bedside televisions and telephones were announced in May 2000 as part of the national NHS Plan. Working with HTS Limited, the Trust has completed installation of our "Hospicom" system ([www.hospicom.co.uk](http://www.hospicom.co.uk)) at both Ashford and St Peter's Hospital.

No longer do patients have to wait for wheelee payphones or TVs and no more do nurses have to field patient's calls. The Trust has installed terminals which provide patients with access to:

- Telephone
- Radio
- E-mail
- Internet Access

### Bedside Access

All patients have to do is buy a pay-as-you-go card and plug it into their dedicated Hospicom terminal above their bed. They are then able to watch TV from a range of channels and make or receive telephone calls on the handset that has a unique number on each bedside. Now all patients have their own private line that they can call out at any time, and friends and relatives can contact them direct.

Patients are also able to view information about the hospitals, go online and surf the web, and email friends and relatives. Services that are free to patients include access to the Trust's website, which includes links to the [daily menu](#), and the national NHS direct website at [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk).

### From the Patients' Perspective

Commenting on the development of patient bedside terminals from her bed on Dickens Ward in November 2003, Walton-on-Thames resident Janet Stanley said:

"I was able to phone my mum in Sheffield twenty minutes after my operation and she is able to phone me direct. This saves me having to wait for the telephone and means my relatives can speak to me direct."

## Choice of Information

The Trust is rapidly developing electronic information for the 21<sup>st</sup> century. Over the last year, our website at [www.ashfordstpeters.nhs.uk](http://www.ashfordstpeters.nhs.uk) has improved significantly providing a complete range of information to patients and the general public. We have also improved our intranet site, TrustNet, to improve internal communications and staff access to information resources that can then benefit patient care.

### Patient Advice and Liaison Service

We also have a Patient Advice and Liaison Service (PALS) resource centres on each site to provide information to visitors. They are based by the Outpatients entrance at St Peter's and by the front desk at Ashford hospital.

### Library Services

Both hospital sites have Health Science Libraries that are open to all local NHS staff to borrow items and members of the public can research subjects of interest. The libraries are located in the Education Centres on both sites. The Library service has developed "KnowledgeNet" that can be accessed through the Trust's website or via its own address: <http://www.knowledgenet.ashfordstpeters.nhs.uk/knet/index.shtml>

### Other Websites

A number of other sites also have a wealth of information about Ashford and St Peter's including:

- [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)
- [www.healthcarecommission.org.uk](http://www.healthcarecommission.org.uk)
- [www.nhs.uk](http://www.nhs.uk)
- [www.drfooster.co.uk](http://www.drfooster.co.uk)

## Choice of Involvement

There are a variety of ways in which you can be involved in the running of your local hospitals:

- [Trust Membership Scheme](#)
- [Patient and Public Involvement](#)
- [Patients' Panel](#)
- [Patients' Forum](#)
- [Volunteering](#)
- [League of Friends](#)
- [Fundraising](#)
- [Donations during 2003/04](#)

### Join the Trust Membership Scheme – it's free!

New for this year is an invitation to become a "[Trust Member](#)". By becoming a Trust Member we will send you the Trust's [quarterly magazine](#) to keep you up to date during the year with developments. If you have an e-mail address, we will e-mail you the Trust's bi-weekly [Bulletin](#). We also plan to organise activities where we open up unseen parts of the hospital to visitors.

To join, simply download the application form for our website at:

<http://www.ashfordstpeters.nhs.uk/intranet/Ashford---/Coming-Int/Trust-Memb/Trust-Membership-Application-Form.doc>

Alternatively, e-mail [comms@asph.nhs.uk](mailto:comms@asph.nhs.uk) or send a stamped addressed envelope to:

Communications  
Ashford and St Peter's Hospitals NHS Trust  
St Peter's Hospital  
Guildford Road  
CHERTSEY  
Surrey  
KT16 0PZ

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## Patient and Public Involvement

Patient and public partnership is an essential component of clinical governance. The importance of involving users of the National Health Service in planning and decision making is now fully recognised. This applies to the experience of individuals needing or receiving treatment and care as well as to the expectations of the wider public.

Being responsive and sensitive to the needs and wishes of patients, their families and carers, has become one of the fundamental principles of good health care. The days are gone when patients were expected to do as they were told. From being passive recipients, they are now becoming more involved in the decisions that affect them, their families, and their communities.

The desirability and benefits of working in partnership are increasingly recognised, but the rising tide of public and individual expectation can seem daunting, even threatening, to hard pressed staff. Effective strategies can help to develop understanding and mutual respect.

Listening and learning are the key – listening to and learning from:

- patients,
- their carers,
- those who visit our hospitals,
- the wider public,
- our staff.

Our aim is that by working in partnership, we can:

- improve our services,

- improve the experience of individual patients
- enhance the satisfaction of staff.

Essential to this are the following:

- **Openness** – in our relationship with patients and the public
- **Accountability** – in listening to the way in which patients and carers experience and view the quality of care they receive
- **Accessibility** – to patients and carers using Trust services
- **Responsiveness** – in listening to patients and carers views and considering the way forward
- **Equity** – in promoting an environment where people from all backgrounds can become involved
- **Effectiveness** – in strengthening the voice of the patient.

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### Patients' Panel

The Trust has established a [Patients' Panel](#) to facilitate patient involvement throughout the Trust. Working within agreed Terms of Reference and chaired by a member of their group the Patients' Panel provides a focus within the Trust for involvement and debate. The Patients' Panel will determine priorities for targeted patient surveys and involvement.

The Panel is made up of representatives who have experience within the Trust as a patient or a carer and representatives of the Trust. Members of the panel have a formal role description and were selected against agreed criteria.

While serving as members of a forum for involvement and debate, members of the panel have also been invited to become members of various groups within the Trust. Examples include:

- Clinical Governance Committee (CGC)
- Patient Environment Action Team (PEAT)
- Essence of Care Steering Committee

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### Patients' Forum

The Patients' Forum is an external body which comes under the umbrella of the [Commission for Patient and Public Involvement in Health](#) (CPPIH). CPPIH was set up in January 2003, and is an independent, non-departmental public body, sponsored by the Department of Health. Its remit is to ensure that the public is involved in decision making about health and health services.

There is a Patient and Public Involvement (PPI) Forum for every NHS Trust and Primary Care Trust (PCT) in England. They are made up of local people and have new powers. PPI Forums are a key vehicle for raising awareness of the needs and views of patients and the public, and placing them at the centre of health services. They will have a number of primary roles, that include:

- Obtaining views from local communities about health services and make recommendations and reports
- Making reports and recommendations on the range and day-to-day delivery of health services
- Influence the design and access to NHS services
- Providing advice and information to patients and their carers about services
- Monitoring the effectiveness of local Patient Advice and Liaison Services (PALS)

Further information about the Patient Forum for Ashford and St Peter's Hospitals NHS Trust and other local NHS organisations can be found at [www.cppi.org](http://www.cppi.org) or from:

Andrew Cooper  
Forum Support Organisation Scope  
MLS Business Centre

Global House  
1 Ashley Avenue  
Epsom  
Surrey  
KT18 5AD

Telephone: 020 8823 9370

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## Volunteering

The [Voluntary Services Department](#) at Ashford and St Peter's Hospitals NHS Trust provides volunteer support for the work of the Trust. Volunteers are used to complement the work of paid staff and contribute an extra service for the support of patients and visitors. In view of this, volunteers are very much recognised and valued as part of the team at the Trust.

Hospital volunteers come from very diverse backgrounds and range from 16 to 93 years of age. With such a variety of skills, abilities and life experiences on offer, the contribution volunteers are able to make to many services is enormous.

Their tasks are many and varied, and range from driving to helping in wards and other departments. For those who prefer a more behind the scenes role, many areas are delighted to receive extra clerical help. In addition, there is a thriving Chaplaincy volunteer team providing invaluable support to patients and visitors.

Even animals get involved with the "Pets as part of Therapy" visiting scheme!

All prospective volunteers meet with one of the Trust's Voluntary Services Managers to explore what opportunities are available and what the volunteer might be interested in doing. There are some basic forms that would need to be completed prior to a volunteer commencing with the Trust and the Voluntary Services Manager would go through this process with the prospective volunteer. All volunteers are required to abide by the Trust's [policies and procedures](#) and these are fully explained to the volunteer prior to commencement of voluntary work. Travel expenses can be reimbursed in most cases so that individuals are not out-of-pocket by helping the Trust.

In addition, Voluntary Services covers a wide range of things apart from managing volunteers. For example:

- arranging distribution of donated items,
- liaison with [League of Friends](#),
- Hospital Radio ("[Radio Wey](#)"),
- [WRVS](#),
- arranging entertainments,
- assisting with patient surveys,
- providing input to many different committees.

Should you wish to know more about volunteering or the [Voluntary Services Department](#), please contact one of the following Voluntary Services Managers:

St Peter's Hospital	Freda Larham	01932 723595
Ashford Hospital	Karen Marsden	01784 884227

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## League of Friends

Both hospitals have very active League of Friends. Both the [Ashford League of Friends](#) (charity number 208774) and the Friends of St Peter's Hospital, Chertsey (charity number 201105) are autonomous organisations but work closely with hospital management and staff.

## Fundraising

Three major appeals are supporting the work of the Trust and improving the care provided for patients:

<p><b>The Stephanie Marks Appeal</b></p>	<p>Ashford and St Peter's NHS Trust launched The Stephanie Marks Appeal in June last year to significantly raise awareness of diabetes as well as raise £2.5 million to provide a specialist diabetes service spanning the Trust's 450,000 catchment area.</p> <p>Further information can be found at <a href="http://www.stephaniemarks.org.uk">www.stephaniemarks.org.uk</a> or from the Fundraising Manager on 01932 722330.</p>
<p><b>Early Births Fund</b></p>	<p>The Early Births Fund has been set up to raise the money we need to expand our Unit. The estimates for this building work are around £1 million, which is being funded by the Department of Health and the Hospital Trust, but we need to raise a further £250,000 to finish the redecoration and buy the medical equipment.</p> <p>For further information, visit their webpages at:  <a href="http://www.ashfordstpeters.nhs.uk/intranet/Ashford---/Fundraisin/Early-Birt/index.htm">http://www.ashfordstpeters.nhs.uk/intranet/Ashford---/Fundraisin/Early-Birt/index.htm</a></p> <p>Alternatively, telephone 01932 722763.</p>
<p><b>Hospital Radio Wey (HRW)</b></p>	<p>Hospital Radio Wey (HRW), the hospital broadcaster that serves hospitals across northwest Surrey and Middlesex launched. The Chertsey based charity is hoping to raise £195,000 to construct and equip a new studio building in time for its 40<sup>th</sup> Anniversary in Autumn 2005.</p> <p>Further information about the appeal and HRW can be found at <a href="http://www.radiowey.co.uk/">http://www.radiowey.co.uk/</a> or from the current HRW Studio on 01932 874433.</p>

There are also a number of smaller appeals run by Departments and Wards. For details, please contact the appropriate Department or Ward.

## Choice of Transport

During 2003/04, the Trust published its first "Travel to Hospital" leaflets. These can be found online (via the links below) or can be obtained from reception desks and Wards or from the Transport helpline on 01932 722218:

- [Travelling to the Trust](#)
- [Ashford Hospital Travel Leaflet](#) (PDF format)
- [St Peter's Hospital Travel Leaflet](#) (PDF format)
- [Car Parking](#)
- [Maps of the Hospital](#)
- [Local Bus Services](#)
- [Hospital Hopper](#)
- [Accessible Transport Guide](#)
- [Surrey Ambulance Service](#) (external website)

The choice of transport to hospital is wide ranging. Apart from the Patient Transport Service (PTS) for those of you with a medical need, you can travel by bus, bike, car, or on foot (especially at Ashford). The specialist transport consultants employed by the Trust during the year found that around 85% of patients and visitors surveyed were able to get to hospital without too much trouble.

### Peterbus Service

The familiar orange 16-seater Peterbus vehicles achieved 20 years of service during 2003/04. The first route was launched from St Peter's Hospital in February 1984 to the New Haw, Byfleet and Sheerwater areas. Now the four routes cover 140,000 miles a year and in the past 20 years have carried 750,000 passengers. It is a joint venture between Surrey County Council and the Trust. Two of the original team are still working as drivers; Cliff Hartop who has 39 years of service in NHS transport, and John Mason with 33 years service.

### Improving the Service

We are continually looking at ways of tying-up with other transport link and increasing the number of pick-up points. We are considering new routes for the buses to ensure we maximise the service to improve access for patients and staff. This will include looking at Peterbuses picking up and dropping off at local train stations. This could be a benefit to passengers, staff and the general public, who can use the service.

### Hospital Hopper – The Inter-site Bus Service

Between the Ashford and St Peter's sites, a free bus service called the "Hospital Hopper" operates. During Autumn 2004, the number of journeys is being increased in response to comments made by patients, visitors and staff. The inter-site bus service between Ashford and St. Peter's hospital sites was started in 2000 to make it easier for staff to travel between the two sites. Over the years it has been used by patients and visitors as well. The service currently runs hourly Monday to Friday between 06:00 hours and 22:00 hours. From Monday 13<sup>th</sup> September, for a pilot period of 13 weeks to Friday 17<sup>th</sup> December, an additional 14 services will run between the core times of 08:00 hours and 17:00 hours.

To view the current timetable, please [click here](#).

We want to encourage more visitors, patients and staff to use the inter-site bus service. We hope that a more frequent service will be more convenient for people between 08:00 am and 5:00 pm. The increased service should also hopefully reduce reliance on cars and reduce pressure on our car parking. At both Ashford and St Peter's hospitals, the inter-site bus leaves from outside the main entrance.

### Car Parking

Although the Trust is encouraging patients, visitors and staff to use public or alternative means of transport, during the year an additional 80 car parking spaces were created across both sites.

Please [click here](#) to find out more about parking charges and facilities for disabled visitors.

## Choice of Careers and Training

Recruitment is always a major issue for any large organisation and the NHS is no different. As well as national recruitment drives, Ashford and St Peter's Hospitals NHS Trust carries out work to help make this Trust a more attractive place to work.

Some of the initiatives used successfully to recruit new employees include Accommodation, NHS Professionals (NHSP) and NHS Week.

- **Housing and accommodation** have been tackled to provide affordable and convenient places to live for all key workers. Many of these types of key worker housing scheme are undertaken in partnership with other government bodies and provide homes for not just health service workers but police, teachers and many other public sector workers.
- **NHS Professionals** has had a leading role in increasing staff numbers at Ashford and St Peter's. [NHSP](#) is an in-house agency providing people with the opportunity to work flexibly to suit their needs while still receiving all the benefits of a full-time member of staff would receive. NHSP staff, unlike staff from other agencies, have a written contract. This also ensures a higher standard of quality and safety, which in turn is beneficial to patients. On top of making our hospitals a better, safer place to be treated, NHSP means that savings are made from the costs of normal agency staff and also the advertising costs.
- **NHS Week** is run every year to provide an insight for youngsters about a career in the NHS. At Ashford and St Peter's there is no interest in staffing just for today. The Trust also looks forward to the future. NHS Week allows supervised groups of 14-15 year olds to come and experience what life is like in any and all departments within the Trust.

### e-Recruitment

Another initiative used is e-recruitment. We were the first Trust nationally to recruit via the web, and the first in Surrey to even use the web as a recruitment tool. Using the web in this way has many benefits, including reducing advertising costs and enabling "hard to fill" positions to be filled. Hard to fill positions include Radiographers, for which there is a well publicised national shortage, but with e-recruitment we have been able to recruit in this area.

The Trust recently celebrated its new e-recruitment service following the appointment of the 100<sup>th</sup> person recruited on-line. Alexander Bristow, a painter and decorator, applied on-line to join the Trust and started work in June 2004. To celebrate this, Alexander joined our Hospital Transfusion Practitioner (an early e-recruitee) to receive a bottle of champagne each from our Trust Recruitment and Retention Manager Cathy Dennis.

The technology behind the e-recruitment process enables applications to be shortlisted by wards and departments on-line as well. This removes the need for reams of paper to be sent out and money.

As one of the largest employers in the local area with over 3000 staff, we have a variety of jobs at Ashford and St Peter's. Things are changing in the NHS and we can offer:

- Flexible working arrangements
- Training
- Support
- Childcare
- Personal and family support
- Good terms and conditions

Please visit our "[Job Opportunities](#)" section on the website for more information, or click on this link to [NHS Jobs](#).

## **Recruitment Campaigns**

The Trust tries to use every opportunity to get its name out as an employer and to encourage anyone who is looking for a change, to think of the NHS, as part of this there are signs on all Trust vehicles such as delivery vans and inter-site buses with details of how to look for a job with us.

The Trust deals with [Job Centre Plus](#), which is a national collaboration between the Department of Health and the Department of Employment, which helps to match unemployed individuals to NHS jobs – this also helps to reduce advertising costs and can often be the reason for filling “hard to fill” posts.

On top of all this, the Trust has also gone abroad to recruit and in 2002 was awarded International Employer Award by the Philippines, which was presented to them by the Present of Manila. The Trust has a comprehensive programme to allow nurses to register with their own professional body.

Reflecting the make up of the local population served by the Trust, the vast majority of staff describe themselves from originating from a “white” background. However, over 62 nations are represented amongst Trust staff.

## **Meeting the Recruitment Challenge**

Ashford and St Peter's Hospitals NHS Trust is the largest single employer in the area after Heathrow airport, and as such we inevitably face difficulties with recruiting staff to fill all posts. However, by coming up with new ideas and new ways to make the NHS even more appealing, this Trust is managing to overcome any of the difficulties it has faced in recruiting new staff.

These initiatives won Ashford and St Peter's Hospitals NHS Trust the “Health Service Journal” award for recruitment and retention in 2003 – above hospitals that have much higher profiles. The hard work of Sian Thomas, Director of Human Resources, and her team was also recently recognised when Sian was awarded HR Director of the Year by the Association of Healthcare Human Resource Management and partner organisations at the Café Royal in London.

## Choice of Support

### For Patients

Whilst the hospitals have designated visiting hours in some areas we welcome friends, family, and others who can provide vital support to patients during their stay with us.

Our [Patient Advice and Liaison Service](#) (PALS) is available to sort out problems before they become serious concerns. In the first instance, we suggest that patients or their representative approach the Ward Sister but PALS can be contacted on 01932 723553 or by email to [pals@asph.nhs.uk](mailto:pals@asph.nhs.uk).

We recognise that sometimes things go wrong. Our customer care team investigates all formal complaints, which we aim to respond to in a maximum of 20 days.

To find out more about our complaints process, please [click here](#).

### For Staff and Volunteers

The Trust's Employee Assistance Programme (EAP) was launched during 2003/04. This programme provides access to free advice and information for staff (and their dependents) as well as our volunteers, including:

- General information and Citizen's Advice services – anything from consumer issues to education or residency advice
- Financial advice
- Legal advice
- Counselling – both on the telephone and face-to-face

The service can be contacted on a free phone number and also Minicom, 24 hours a day, 365 days a year.

### For Everyone

The Chaplaincy Team aims to be available to all patients, staff and visitors of all faiths and of none. The Chaplains are also happy to assist in making contact with other religious leaders in the local community.

The Chaplains and members of the volunteer Chaplaincy Visitor Team visit the wards regularly. However, if a Chaplain is needed urgently, or if a visit is required at a specific time, please contact the Hospital switchboard and ask for the "on call" Chaplain. This may be done by dialling "0" from one of the internal phones or 01784 884488 (Ashford) or 01932 872000 (St Peter's) if you are ringing from outside the hospitals.

The Chapels at both Hospitals are open every day and everyone is most welcome to use them for prayer and quiet.

For more information about our Chaplaincy services, please [click here](#).

## Clinical Governance – The Safe Choice

We recognise that patients want to be assured their local hospitals are as safe as possible. Medicine is not an exact science but there are many proven ways of ensuring the services are clinical safe and risks minimized.

During the last year, Ashford and St Peter's has:

- Been reviewed by Surrey and Sussex Strategic Health Authority, on behalf of the Healthcare Commission (formerly the Commission for Health Improvement or "CHI") who identified that objectives from the Trust's **clinical governance review** had been met.
- Introduced a **clinical governance framework** that has strengthened risk management and fostered improvements in the quality of clinical care.
- Introduced "**Standards for Practice and Care**" that are designed for all staff working with patients.
- Put in place a rigorous **incident reporting** system with arrangements for lessons to be learnt and changes in practice to be implemented.
- Provided training (**Terema**), based on that provided in the airline industry, to Consultants, senior clinical and nursing staff and managers, which reinforces individual responsibility for a safe patient environment, good team working, and good communication.
- Developed an **electronic risk register** that takes information from risk assessments and other sources.
- Introduced **root cause analysis** that helps us to learn lessons from incidents and complaints pinpointing areas for change.

You can find more information about Clinical Audit, Effectiveness and Governance on our [Quality Department](#) pages.

## Hospital Acquired Infection

Led by the Infection Control Team, several initiatives have been introduced to raise awareness and reduce the risk and number of hospital acquired infections (HAIs). The Infection Control Team also monitors compliance with issues around infection control including isolation procedures, knowledge of isolation in relation to MRSA and reviews incident forms relating to infection control.

Over the last 12 months, a major campaign has been underway to promote hand-washing with poster featuring staff, education as part of induction for all staff (including junior doctors) and as part of Training Days.

### MRSA Rates

National figures published in July 2004 (on the [Department of Health website](#)), show that the rates of the so called "superbug" MRSA have reduced significantly at Ashford and St Peter's Hospitals. The rates of MRSA per 1000 bed days for Ashford and St Peter's Hospitals NHS Trust over the last three years are:

	Number of Cases	MRSA Rate (per 1000 bed days)
April 2001 to March 2002	60	0.29
April 2002 to March 2003	65	0.32
April 2003 to March 2004	44	0.23

Initial indications from data covering April to July 2004 are that this rate of infection has fallen further.

### Bed Occupancy

Bed occupancy at Ashford and St Peter's currently stands at over 95% against a recommended 82%.

In 2004/05, the Trust is aiming to ensure that no patient stays in hospital one day more than they absolutely have to. It is believed that this will do much to reduce infection rates further.

### Reducing Urinary Tract Infection Rates

Innovative work during 2003/04 at Ashford and St Peter's on reducing catheter associated urinary tract infections was recognised in the National Audit Office's report "[Improving Patient Care by Reducing the Risk of Hospital Acquired Infection: A Progress Report](#)".

During the trial period, using silver alloy catheters at Ashford Hospital, urinary tract infection rates were reduced by 60%.

### Infection Control and Intensive Care

A team from the Trust (Infection Control Team, Clinical Risk and Intensive Care) supported by 3M are working with the Modernisation Agency on a programme for preventing healthcare associated infections (the CHAIN project). This programme is initially looking at Intensive Care, where patients can be vulnerable to hospital acquired infection.

## Research and Evidenced Based Practice

We place great importance on research and evidenced based practice by:

- Putting into operation 23 “Integrated Care Pathways” (ICPs) that enable planned care to be monitored against outcomes for effectiveness. More ICPs are in development.
- Providing good access through our [Health Science Libraries](#) on both sites to the latest evidence.
- Implementing Clinical Audit: areas looked at through the year included:
  - Record keeping
  - Stroke
  - Coronary Heart Disease (CHD)
  - Chronic Obstructive Pulmonary Disease (COPD)
  - Tonsillectomy
  - A variety of cancer related audits
- Introducing a systematic framework for responding to the recommendations in the annual CEPOD reports.
- Working jointly with the Surrey Adult Protection Committee to implement the recommendations from their study, [“Knowledge and Belief about Abuse of Vulnerable Adults across Surrey.”](#)
- Developing Child Protection training in consultation with Surrey Area Child Protection Committee.

## **Competent Practice in the Workplace: Skills Lab**

Clinical Skills training is vital to ensure that staff are competent practitioners, delivering safe and effective clinical care.

Clinical Skills training includes a knowledge base, the technical skill and practical experience that must all be present in a competent practitioner.

### **Clinical Skills Laboratories**

To achieve this knowledge foundation, the technical skills are taught in the Clinical Skills Laboratories. During the year, the Trust opened a skills lab at Ashford Hospital. The aim of the Lab is to provide the development of clinical skills training, with the emphasis on interdisciplinary learning to improve the delivery of high quality patient care, with improved teamwork and communication.

## Patient Feedback

Patient surveys are vital to Ashford and St Peter's. We need to know what our patients think about us so that we can improve our services for local people. On clinical care, we know from benchmarking against other NHS Trusts that our standards are high. We also know that continued improvement is needed around:

- the ward and hospital environment,
- communication between staff and with patients,
- discharge arrangements,
- the provision of information to patients and relatives.

## Patient Surveys

In August 2004, the Healthcare Commission published the results of surveys of adult and young inpatients who stayed with us in November 2003. The adult inpatient survey shows some improvements on the 2002 survey and the Picker Institute who conducted the survey for the Trust have asked us to identify areas of good practice so that these can be shared. Nevertheless, we believe we still have some way to go and we are working to make further improvements.

The adult inpatient survey was sent out in January and February 2004 to patients who were discharged from the Trust in November 2003. There was a 57.7% response rate with 474 out of 850 questionnaires returned. Compared to the 2002 survey, Ashford and St Peter's did significantly better on 9 questions. There was no significant difference on the 59 other questions.

Further information about the 2004 survey can be found by [clicking here](#).

## Customer Care

During the year, staff in wards and departments worked hard to ensure local resolution and address issues as they have arisen. The work of the Patient Advice and Liaison Service (PALS) is also a significant factor in handling concerns at an early stage.

### Staff Training

Training in dealing with complaints is available for staff at all levels across the Trust and this again promotes a pro-active approach to dealing with concerns and issues at the time. Where a complaint does happen, this needs to be investigated and any resulting changes in practice need to be identified and shared with those raising the complaint. Training is provided in investigating and report writing as well as action planning.

### Total Complaints Received During the Year

Total number of complaints received (response rate) 2003/04				
Quarter	April to June 2003	July to September 2003	October to December 2003	January to March 2004
Total	98 (99%)	106 (100%)	105 (100%)	112 (100%)

A total of 421 complaints were received during the year. There were 144 complaints relating to Ashford, 274 relating to St Peter's and 2 complaints relating to both sites and 1 "off-site". The Trust has maintained the improvement in its 20-day response rate.

The number of complaints varies from year to year:

Year	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04
Total number of complaints	494	559	649	358	338	421

The Trust undertakes an investigation into all complaints received. The majority of complaints were dealt with by letter, with an explanation and apology as appropriate. In some cases, complainants were invited to meet staff for more detailed discussion.

### Changes in Practice Resulting from Complaints

Summary of Complaint	Action Taken
Patient had minor surgery performed on the wrong part of her face.	Mirror placed in day surgery to check the area of the operation with the patient.  Photographs to be taken to confirm treatment with patient.
Patient's notes not available during inpatient stay and were not located until day of discharge.	Action plan now implemented on the Medical Assessment Unit to ensure that all patient's records are obtained promptly and are available on the ward following their admission.

Concerns regarding three hour wait to see Doctor in clinic	Four nurses recruited as well as full time receptionist to assist in smooth running of clinic.
Concerns relating to care patient received on the ward following surgery, in particular to nutritional needs	New fasting policy prevents patients being without food for more than 6 hours.
Concerns relating to poor standard of isolation room on ward.	Arrangements made for repair of room and rooms to be redesigned to create more space.

### Independent Reviews 2003/04

Regrettably, the Trust is not always able to resolve a complaint. In this situation, the complainant has the right to request an Independent Review of their case.

Until 30<sup>th</sup> July 2004, the decision as to whether there can be an Independent Review was taken by a Convenor, appointed by the Trust Board, and a lay Chairperson. Having reviewed a case they can decide:

- That the Trust has answered the complainant's concerns and there is no further action to be taken
- That the case is referred back to the Trust for further resolution
- That an Independent Review panel will be established

A decision regarding an Independent Review should be made within 20 days of the complaint's request. When an Independent Review is agreed the process of hearing the review should be completed within six months.

During 2003/04, the Trust received 9 requests for an Independent Review. This was less than 2000/01 (20) and 2001/02 (11) but an increase on the 6 requests received in 2002/03. These were considered as follows:

Independent Review 2003/04	Number of Cases
Request received	9

Decision	Number of Cases
Request refused / no further action to be taken	9
The case was referred back to the Trust for local resolution	0
Request withdrawn	0

Following a review of the Complaints procedure, there are planned changes to the Independent review process. These came into force on 30<sup>th</sup> July 2004. From this date, complainants who are unhappy with the Trust's response to their concerns will have the right to ask the Healthcare Commission to undertake an independent review of their case.

### The Health Service Ombudsman

If a complainant is unhappy about the way the complaint has been dealt with, either by the Trust or the Independent Convenor, they may apply to the Ombudsman ([www.ombudsman.org.uk](http://www.ombudsman.org.uk)) to have the matter reviewed.

The Ombudsman's job is to investigate complaints from members of the public about hospitals and other services within the NHS. The Ombudsman is not part of the Government or the NHS but holds an independent office established by Parliament. During 2003/04, the Ombudsman undertook two investigations into cases involving either Ashford or St Peter's Hospitals.

In one case (which related to an incident in 1999), the Ombudsman found there had been failings in care and made a number of recommendations to the Trust. In the second case, there was no further action required by the Trust.

## Corporate Governance

Led by the Chief Executive Glenn Douglas, the Trust is managed by a team of Executive Directors. The Chairman, Clive Thompson CBE, leads the team of Non-Executive Directors. The Executive and Non-Executive Directors make up the Trust Board who are responsible for the overall **corporate governance**, management and direction of the Trust.

Key functions include:

- Developing strategy
- Establishing and approving Trust policies
- Approving budgets and business plans
- Meeting statutory obligations
- Achieving national policy and performance requirements
- Maintaining financial viability
- Ensuring compliance of clinical effectiveness and quality assurance programmes
- Ensuring managerial competency
- Observing codes of openness and accountability in the Trust's dealing with the public, staff and external organisations.

In fulfilling their roles all Non-Executives Directors are attached to a Clinical Directorate and are active participants in Board Committees.

The following links may be of interest:

- [Trust Board members](#)
- [Trust Board meetings](#)
- [Trust Board minutes](#)

## Trust Board and Board Committees

The following pages provide a profile of the Board, details of membership of Board committees and details of Directors' interests.



The following organisations are invited to join Board members at the table:

- Hounslow Primary Care Trust (PCT) – [www.hounslowpct.nhs.uk](http://www.hounslowpct.nhs.uk)
- North Surrey PCT – [www.nsureypct.nhs.uk](http://www.nsureypct.nhs.uk)
- Surrey Heath and Woking PCT – [www.shawpct.nhs.uk](http://www.shawpct.nhs.uk)
- Chair of the Patient Forum for Ashford and St Peter's – [www.cppi.org.uk](http://www.cppi.org.uk)
- Chair of the Patient's Panel at Ashford and St Peter's

### Board Committees

Board membership of Board committees is outlined below with the following annotations:

- **AC** = Audit Committee
- **FC** = Finance Committee (that incorporates Charitable Funds Committee)
- **R&IAB** = Risk and Incident Advisory Board
- **RC** = Remuneration Committee

Board Member	Executive Role	Committees
Clive Thompson CBE	Chairman	Ex-officio member of all committees
Mary Riley	Vice Chair	RC
Peter Field	Non-Executive Director	AC, FC, R&IAB, RC
Michael Bailey	Non-Executive Director	AC, FC, RC
Jenny Murray	Non-Executive Director	R&IAB, RC
Liz Brooks CBE	Non-Executive Director	AC, FC, RC
Glenn Douglas	Chief Executive	AC, FC, R&IAB
Joyce Winson Smith	Deputy Chief Executive and Director of Nursing	R&IAB
Dr Mike Baxter	Medical Director	R&IAB
Sian Thomas	Director of Human Resources	FC
Jayne Connelly	Director of Strategic Development	
Jacqui Smart	Director of Intermediate Care and Therapies	
Nick Hulme	Director of Operations	FC
Keith Mansfield	Director of Finance and Information	AC, FC

## Declaration of Interests

Board Member	Executive Role	Interests
Clive Thompson CBE	Chairman	Associate Director of AB Biomonitoring Ltd Stephanie Marks Appeal (board member)
Mary Riley	Vice Chair	Early Births Fund appeal (Chair)
Peter Field	Non-Executive Director	n/a
Michael Bailey	Non-Executive Director	n/a
Jenny Murray	Non-Executive Director	n/a
Liz Brooks CBE	Non-Executive Director	n/a
Glenn Douglas	Chief Executive	Advisor in Healthcare to Capita Group plc Stephanie Marks Appeal (board member)
Joyce Winson Smith	Deputy Chief Executive and Director of Nursing	Kings Fund/HQS Surveyor of Hospitals
Dr Mike Baxter	Medical Director	Diabetes UK (President of local branch) Stephanie Marks Appeal (board member)
Sian Thomas	Director of Human Resources	Brooklands College (Governing Board)
Jayne Connelly	Director of Strategic Development	n/a
Jacqui Smart	Director of Intermediate Care and Therapies	Joint post with North Surrey PCT
Nick Hulme	Director of Operations	Terence Higgins Trust (non-executive director)
Keith Mansfield	Director of Finance and Information	Early Births Fund (board member) Stephanie Marks Appeal (board member)

## Organisation and Accountability

The Chief Executive Officer is the accountable officer for Clinical Governance within the Trust.

The Trust Board and the Management Board lead commitment to quality. Executive responsibility for the provision of effective quality and risk management structures and systems, and for the quality improvement strategy, is delegated by the Chief Executive to the Director of Nursing/Deputy Chief Executive.

The Risk and Incident Advisory Board is established as a subcommittee of the Trust Board. The Risk and Incident Advisory Board provides a systematic and focused mechanism for top level monitoring and review of risk and incidents. It will provide strategic direction and review compliance with [clinical governance](#) and the non-financial areas of [Controls Assurance](#). The Risk and Incident Advisory Board meets on a 2-3 monthly basis.

The Clinical Governance Committee functions as the steering group to develop, oversee and evaluate action and improvement planning to meet clinical governance requirements, through links with:

- Directorate clinical governance groups, and
- Clinical subcommittees and groups defined within the Trust's Quality and Risk Management Accountability Structure.

## Trust Board Profiles

### Non-Executive Directors



**Clive Thompson CBE, Chairman**

After education in North Wales, UMIST and Harvard Business School I spent 34 years in the chemical industry and was a director of BP Chemicals and Vice President of ARCO Chemical. From 1991-97 I was an Audit Commissioner and Deputy Chairman from 1994-97. I was a non-executive director at Frimley Park before my appointment as Chairman of Ashford & St. Peter's in March 2002. I have enjoyed being part of the Trust's increasing success and our preparation for future challenges. I am an Associate Director of AB Biomonitoring Ltd and sit on the Board of the Stephanie Marks Appeal.



**Mary Riley, Vice Chair**

Having previously been a Non-Executive Director at Ashford Hospital I have been pleased to be able to maintain my association with the combined Trust and take a close interest in St Peter's as well as Ashford. I attend meetings of the Older People Action Group, Women and Family Services Directorate and Chair the Early Births Fund appeal. All this gives me an insight into the many challenges facing the Trust. My interests include travel, tapestry, reading and my grandchildren.



**Peter Field, Non-Executive Director**

I have been a non-executive board member since 2000. In addition to representing the interests of my local community of Woking and West Byfleet, my principle role within the Trust is working with its Board of Directors to tackle its strategic and financial challenges in order that our front line doctors and nurses can concentrate on delivering patient services. I enjoy flying when I get the opportunity.



**Michael Bailey, Non-Executive Director**

I see my role as sharing my experience with my colleagues in the NHS, bringing a different perspective to the issues we face and helping to ensure that we put our patients first. I chair the Remuneration Committee and take a particular interest in the work of the Medical and Orthopaedic Departments. I am a former Director of Glaxo Wellcome, widowed with two children and live in Weybridge. My interests include bridge, skiing and just about anything to do with horses.



**Jenny Murray, Non-Executive Director**

I chair the Trust's Complaints Monitoring Committee, sit on the Risk Management and Quality Board; and am particularly interested in clinical governance. Since retiring from the world of teaching I have worked as an education consultant and as an OFSTED inspector. My leisure pursuits include my family, playing golf and reading.



**Liz Brooks CBE, Non-Executive Director**

My special responsibility is to maintain strong links with the Human Resources department, in which role I chair the Improving Lives and Housing steering groups. I am a member of the Board Strategy Overview Group, the Finance, Audit and Remuneration Committees. I also chair the Essence of Care Communications group and attend Surrey Heath and Woking PCT meetings. My main aim is to focus my efforts in a way that will enable our staff to enhance the quality of services to patients. My interests include travel, design and gardening.

## Executive Directors



**Glenn Douglas  
Chief Executive**

I joined the Trust in July 2002. My background is mainly NHS having worked in a number of other Trusts and Health Authorities in Sussex, Kent and Manchester. I also spent four years working for Coopers Lybrand as a management consultant. I am married to Catriona, A Multiple Sclerosis Specialist Nurse, and we have two young daughters. I am an Advisor in Healthcare to Capita Group plc and sit on the Board of the Stephanie Marks Appeal.



**Joyce Winson Smith  
Deputy Chief Executive & Director of Nursing**

I provide professional leadership for nursing services, using our strategy for Nursing and Midwifery, "Caring for the Future", to drive the highest standards of practice and care and to develop and support nurses and midwives. I play a major role in quality and risk management and work closely with the Medical Director in leading clinical governance. I contribute to the development of wider healthcare quality through my contribution as Kings Fund/HQS surveyor of hospitals in this country and abroad. I have also been a CHI reviewer. I am a keen mountain walker.



**Dr. Mike Baxter  
Medical Director**

In my role as Medical Director I serve the Trust by overseeing the development of a stronger, unified, more focused and sustainable acute medical service fashioned with the new NHS demands in mind. My aim is to foster increased openness in a working culture which allows us to develop our services in partnership with our patients, primary care colleagues and the dedicated staff within the Trust who work so hard to deliver good care. I am President of the local branch of Diabetes UK and sit on the Board of the Stephanie Marks Appeal.



**Siân Thomas  
Director of Human Resources**

I have been with the Trust for four years. I take the lead role in the areas of education and training, staff support, general personnel services and am responsible for Trust occupational health and nursery provision. The current priorities for the Trust include recruitment and retention and improving the working lives of staff. I have worked in the NHS for 20 years, mostly in Liverpool and the North West. I am on the Governing Board of Brooklands College.



**Jayne Connelly**  
**Director of Strategic Development**

Following maternity leave and a two year secondment with the London based National Cancer Action Team, I returned to the Trust in 2002. I now lead a small team co-ordinating service planning for the Trust, including future service configuration, clinical service developments and the setting and reviewing of service agreements with local Primary Care Trusts.



**Jacqui Smart**  
**Director of Intermediate Care and Therapies**

My post is a joint one with North Surrey Primary Care Trust, and I work closely with the Executive Team developing rehabilitation services across north west Surrey to support patients and the Trust.



**Nick Hulme**  
**Director of Operations**

I am responsible for all clinical services, including performance improvement and service modernisation. I take the lead on the Trust's performance issues and developing services in line with national and local priorities including working with Social Services to ensure patients are discharged in a timely and appropriate way. I have worked in social services and the health service at all levels for 25 years. I am Non-Executive Director of the Terence Higgins Trust.



**Keith Mansfield**  
**Director of Finance & Information**

I joined the Trust in May 2003 from The West Suffolk Hospitals NHS Trust. I am responsible for all aspects of the Trust's financial services, procurement services and the provision of information management and technology (IM&T). All departments provide services to other NHS organisations, notably the Payroll Department that serves nine. My main duties include formulating and monitoring financial, procurement and IM&T strategies, and providing advice and information to the Board and others. I am a member of the Boards for the Early Births Fund and Stephanie Marks Appeal.

## Board Meetings

Meetings of the Board are held in public with an opportunity for people attending to ask questions.

The dates and venues for meetings in 2005 and are:

Date	Time	Venue
27 <sup>th</sup> January 2005	2.00 p.m.	Lecture Theatre, Ramp, St. Peter's
24 <sup>th</sup> March 2005	2.00 p.m.	Education Centre, Ashford
26 <sup>th</sup> May 2005	2.00 p.m.	Lecture Theatre, Ramp, St. Peter's
21 <sup>st</sup> July 2005	2.00 p.m.	Education Centre, Ashford
29 <sup>th</sup> September 2005	2.00 p.m.	Lecture Theatre, Ramp, St. Peter's
24 <sup>th</sup> November 2005	2.00 p.m.	Education Centre, Ashford

The Trust's annual meeting and open evening in 2005 will be held on Thursday 29<sup>th</sup> September 2005 in the Education Centre at St Peter's.

Further information about Board meetings and copies of the papers can be found on the Trust's website:

- Link to [Board Minutes](#)

## A Good Choice – Our Stars

The NHS performance rating system places NHS Trusts in England into one of four categories:

- Trusts with the highest levels of performance are awarded a performance ratings of three stars
- Trusts that are performing well overall, but have not quite achieved the same consistently high standards, are awarded a performance rating of two stars
- Trusts where there is some cause for concern regarding particular areas of performance are awarded a performance rating of one star
- Trusts that have shown the poorest levels of performance against the indicators or little progress in implementing clinical governance are awarded a performance rating of zero stars.

The detailed performance report for Ashford and St Peter's Hospitals (organisation code RTK) is available on the Healthcare Commission website ([www.healthcarecommission.org.uk](http://www.healthcarecommission.org.uk)) or via the links below:

- [Summary Report](#)
- [Trust Report](#)
- [Surrey and Sussex summary](#)

The Trust has now achieved **two stars** for two years running. In 2001, the Trust was zero rated and in 2002 achieved one star.

### Nine Key Area

- **12 hour waits for emergency admissions via A&E post decision to admit** – eliminated in 2003/04
- **All Cancers: 2 week wait** – waiting times were reduced in 2003/04
- **Financial Management** – we broke even in 2003/04
- **Hospital Cleanliness** – independent inspections rated the Trust good on cleanliness
- **Improving Working Lives** – new initiatives such as housing, a confidential helpline and childcare, make Ashford and St Peter's a better place to work
- **Outpatient and elective (inpatient and daycase) booking** – all patients now get a telephone call offering a choice of date and time
- **Outpatients waiting longer than the standard** – no outpatient now waits longer than 13 weeks for an appointment
- **Patients waiting longer than the standard for elective admission** – most waiting lists are now down to 6 months (a year in ahead of the national target – 9 months by 31/03/04)
- **Total time in A&E: 4 hour or less** - the time patients spend in A&E has been reduced

### Additional “Good” Ratings

In addition to these key areas, the Trust achieve the top Band 5 (good) in the following areas:

- **Thrombolysis (30 minute door to needle time)** – more than 75% of patients requiring thrombolysis receive it within 30 minutes of reaching hospital
- **Clinical governance composite indicator** – the extent to which clinical governance systems and reports are in place

- **Composite of participation in audits** – the extent to which the Trust participated in audits
- **“Winning Ways” (processes and procedures)** – this related to the control of infection
- **Better hospital food** – independent inspections rated the Trust good on food
- **Day case patient booking** – percentage of day cases that were pre-booked
- **Patient complaints** – percentage of written complaints for which local resolution was achieved within 20 days

## How many people were cared for at Ashford & St. Peter's during 2003/04

In 2003/04, the Trust treated:

	2003/04	2002/03	2001/02	2000/01	1999/00	1998/99
Births	3,474	3,387	3,577	3,892	3,919	4,118
Day cases	22,898	21,326	21,029	20,117	18,673	18,727
Elective operations	7,694	7,480	6,942	7,036	6,710	7,630
Emergency cases	26,654	22,008	21,606	22,090	21,185	22,361
Inpatient Waiting List (as at 31 <sup>st</sup> March)	5,456	6,982	7,793	8,078	8,783	7,676
Outpatients	293,088	276,489	269,609	275,445	273,718	262,712
A&E Attendances	101,743	98,159	98,152	98,973	100,208	99,170

## Financial Performance Summary

The Trust's financial performance for 2003/04 is summarised as follows:

	2003/04 (£000)		2002/03 (£000)	
	Target	Actual	Target	Actual
<b>Breakeven</b>	0	5	0	(1,328)
<b>Capital Cost Absorption Rate *</b>	3.5%	3.8%	6%	6.48%
<b>External Financing Limit</b>	1,598	1,598	1,219	1,216
<b>Capital Resource Limit</b>	8,672	8,476	4,304	4,287

\* there has been a change in the Capital Cost Absorption Rate required between financial year.

The Trust achieved a surplus of £5,000 in 2003/04, this being the figure used to measure the achievement of the in-year Breakeven duty. The Trust is required to show on the face of its Income and Expenditure Account the planned support it receives in each financial year. In setting a balanced budget at the start of the 2003/04 financial year, planned financial support of £18,500,000 was agreed with, and received from, the NHS Bank. In 2004/05, the Trust is expecting to receive £13,000,000.

### Achieving Financial Balance

The Trust faces a significant challenge in achieving financial balance and meeting service delivery targets for the year ending 31<sup>st</sup> March 2005. The trust is in the process of identifying further measures to achieve the required level of income and expenditure reduction to achieve financial balance in 2004/05.

The Trust has been granted an extension from three to five years to achieve its cumulative breakeven duty. Based on past performance, the trust is only able to plan to breakeven on an annual basis, putting at risk the achievement of this duty by 31<sup>st</sup> March 2005. Following discussions with Surrey and Sussex Strategic Health Authority, they have agreed to discuss solutions with the Department of Health.

The Capital Cost Absorption Rate, External Financing Limit and Capital Resource Limit were all within accepted tolerances.

### Obtaining a Full Set of the Accounts

The statements on this site are a summary of the Annual Accounts for the financial year 2003/04. A full set of Annual Accounts for Ashford and St Peter's Hospitals NHS Trust are available from the Director of Finance and Information by telephoning 01932 722819 (there may be a charge to cover copying expenses).

## Income and Expenditure Account

For the year ended 31<sup>st</sup> March 2004:

	<b>2003/04</b> £'000s	<b>2002/03</b> £'000s
<b>Income from activities:</b>		
Continuing operations	136,664	125,982
<b>Other operating income:</b>		
Continuing operations	14,431	13,682
<b>Operating expenses:</b>		
Continuing operations	(146,576)	(134,034)
<b>OPERATING SURPLUS</b>		
Continuing operations	<b>4,519</b>	<b>5,630</b>
(Loss)/profit on disposal of fixed assets	(38)	4
<b>SURPLUS BEFORE INTEREST</b>	<b>4,481</b>	<b>5,634</b>
Interest receivable	168	186
Interest payable	(2)	(3)
<b>SURPLUS FOR THE FINANCIAL YEAR</b>	<b>4,647</b>	<b>5,817</b>
Public Dividend Capital dividends payable	(4,642)	(7,145)
<b>RETAINED SURPLUS (DEFICIT) FOR THE YEAR</b>	<b>5</b>	<b>(1,328)</b>
 <b>Note to the Income and Expenditure Account</b>		
	£'000s	£'000s
Retained surplus/(deficit) for the year	5	(1,328)
Financial support included in retained surplus/(deficit)	(18,500)	(13,750)
Retained surplus/(deficit) for the year excluding financial support	(18,495)	(15,078)

**Balance Sheet as at 31<sup>st</sup> March 2004**

	<b>31/03/04</b>		<b>31/03/03</b>
	£'000s	£'000s	£'000s
<b>FIXED ASSETS</b>			
Intangible assets		155	36
Tangible assets		150,613	136,312
		<u>150,768</u>	<u>136,348</u>
<b>CURRENT ASSETS</b>			
Stocks and work-in-progress	1,585		1,559
Debtors	9,211		8,031
Cash at bank and in hand	598		577
		<u>11,394</u>	<u>10,167</u>
<b>CREDITORS:</b> Amounts falling due within one year		(27,303)	(25,033)
<b>NET CURRENT LIABILITIES</b>		<u>(15,909)</u>	<u>(14,866)</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>		134,859	121,482
<b>CREDITORS:</b> Amounts falling due after one year		-	-
<b>PROVISION FOR LIABILITIES AND CHARGES</b>		(1,532)	(1,157)
<b>TOTAL ASSETS EMPLOYED</b>		<u><b>133,327</b></u>	<u><b>120,325</b></u>
<b>FINANCED BY:</b>			
<b>TAXPAYERS' EQUITY</b>			
Public dividend capital		79,603	78,005
Revaluation reserve		58,878	48,384
Donated asset reserve		835	904
Income and expenditure reserve		(5,989)	(6,968)
<b>TOTAL TAXPAYERS' EQUITY</b>		<u><b>133,327</b></u>	<u><b>120,325</b></u>

Signed by Glenn Douglas, Chief Executive of Ashford and St Peter's Hospitals NHS Trust on 22/07/04.

## Statement of Total Recognised Gains and Losses

For the year ended 31<sup>st</sup> March 2004:

	<b>2003/04</b> £'000s	<b>2002/03</b> £'000s
Surplus for the financial year before dividend payments	4,647	5,817
Fixed asset impairment losses	(42)	(4,694)
Unrealised surplus on fixed asset revaluations/indexation	11,548	19,101
Increases in the donated asset reserve due to receipt of donated assets	72	225
Reduction in the donated asset reserve due to the depreciation, impairment and disposal of donated assets	(179)	(202)
<b>Total recognised gains and losses for the financial year</b>	<b>16,046</b>	<b>20,247</b>
Prior period adjustment: Pre- 6 <sup>th</sup> March 1995 early retirements	-	(833)
<b>Total recognised gains and losses in the financial year</b>	<b>16,046</b>	<b>19,414</b>

## Cash Flow Statement

For the year ended 31<sup>st</sup> March 2004:

	2003/04	2002/03
	£'000s	£'000s
<b>OPERATING ACTIVITIES</b>		
<b>Net cash inflow from operating activities</b>	<b>10,267</b>	<b>9,973</b>
<b>RETURNS ON INVESTMENTS AND SERVICING OF FINANCE</b>		
Interest received	168	186
Interest paid	(2)	(3)
<b>Net cash inflow from returns on investments and servicing of finance</b>	<b>166</b>	<b>183</b>
<b>CAPITAL EXPENDITURE</b>		
Payments to acquire tangible fixed assets	(7,261)	(8,339)
Receipts from sale to tangible fixed assets	-	4,111
Payments to acquire intangible assets	(128)	(36)
<b>Net cash inflow/(outflow) from capital expenditure</b>	<b>(7,389)</b>	<b>(4,264)</b>
<b>DIVIDENDS PAID</b>	<b>(4,642)</b>	<b>(7,145)</b>
<b>Net cash inflow/(outflow) before management of liquid resources and financing</b>	<b>(1,598)</b>	<b>(1,253)</b>
<b>MANAGEMENT OF LIQUID RESOURCES</b>		
Purchase/sale of investments	-	-
<b>Net cash inflow/(outflow) from management of liquid resources</b>	<b>-</b>	<b>-</b>
<b>Net cash inflow/(outflow) before financing</b>	<b>(1,598)</b>	<b>(1,253)</b>
<b>FINANCING</b>		
Public dividend capital received	1,598	2,000
Public dividend capital repaid (not previously accrued)	-	(736)
Other capital receipts	-	37
<b>Net cash inflow/(outflow) from financing</b>	<b>1,598</b>	<b>1,301</b>
<b>Increase in cash</b>	<b>-</b>	<b>48</b>

## Senior Managers' Salary and Pension Entitlements

The Trust has included within the definition of senior managers; the members of the Executive Team, as well as the Chairman and Non-executive Directors.

Name and Title	Title	Note	Financial Year	Salary (bands of £5,000)	Other remuneration (bands of £5,000)	Real increase in pension at age 60 (bands of £2,500)	Total accrued pension at age 60 at 31/03/04 (bands of £5,000)	Benefits in kind
<b>Executive Team</b>				£'000s	£'000s	£'000s	£'000s	£'000s
Glenn Douglas	Chief Executive	A	2003/04	105-110	-	2.5-5	25-30	3
			2002/03	65-70	-	2.5-5	15-20	2
Keith Mansfield	Director of Finance and Information	B	2003/04	75-80	-	2-2.5	25-30	3
			2002/03	-	-	-	-	-
David Slegg	Director of Finance and Information	B	2003/04	-	-	-	-	-
			2002/03	See note	See note	See note	See note	See note
Paul Doyle	Acting Director of Finance	B	2003/04	5-10	-	0-2.5	0-5	-
			2002/03	30-35	-	0-2.5	0-5	-
Mark Jennings	Director of Clinical and Non-Clinical Services	C	2003/04	60-65	-	2-2.5	20-25	3
			2002/03	65-70	-	2-2.5	20-25	4
Joyce Winson Smith	Director of Nursing		2003/04	80-85	-	2-2.5	20-25	4
			2002/03	70-75	-	0-2.5	20-25	4
Dr Mike Baxter	Medical Director		2003/04	25-30	90-95	0-2.5	20-25	-
			2002/03	15-20	80-85	0-2.5	20-25	-
Sian Thomas	Director of Human Resources		2003/04	70-75	-	2.5-5	20-25	7
			2002/03	60-65	-	0-2.5	15-20	6
Nick Hulme	Director of Operations	D	2003/04	75-80	-	0-2.5	10-15	-
			2002/03	20-25	-	0-2.5	10-15	-
Liz McLean	Director of Performance		2003/04	-	-	-	-	-
			2002/03	30-35	-	2.5-5	20-25	1
Jayne Connelly	Director of Strategic Development		2003/04	50-55	-	0-2.5	10-15	4
			2002/03	30-35	-	0-2.5	10-15	4
Sylvia Meakin	Acting Director of Strategic		2003/04	-	-	-	-	-

	Development		2002/03	15-20	-	0-2.5	0-5	-
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Chairman and Non-Executives			£'000s	£'000s	£'000s	£'000s	£'000s	
Clive Thompson	Chairman		2003/04	20-25	-	-	n/a	n/a
			2002/03	20-25	-	-	n/a	n/a
Liz Brooks	Non-Executive Director		2003/04	5-10	-	-	n/a	n/a
			2002/03	5-10	-	-	n/a	n/a
Peter Field	Non-Executive Director		2003/04	5-10	-	-	n/a	n/a
			2002/03	5-10	-	-	n/a	n/a
Michael Bailey	Non-Executive Director		2003/04	5-10	-	-	n/a	n/a
			2002/03	5-10	-	-	n/a	n/a
Mary Riley	Non-Executive Director		2003/04	5-10	-	-	n/a	n/a
			2002/03	5-10	-	-	n/a	n/a
Jenny Murray	Non-Executive Director		2003/04	5-10	-	-	n/a	n/a
			2002/03	5-10	-	-	n/a	n/a

## Notes:

- A. Glenn Douglas was the Chief Executive Designate from 1<sup>st</sup> July 2002 until 31<sup>st</sup> March 2003, and became Chief executive on 1<sup>st</sup> April 2003.
- B. David Slegg was the Director of Finance and Information until 20<sup>th</sup> October 2002 and withheld his consent to disclosure. Paul Doyle was appointed on 1<sup>st</sup> October 2002 and was in post until 8<sup>th</sup> May 2003 when Keith Mansfield took up the post.
- C. Mark Jennings was seconded to the NHS Modernisation Agency on 1<sup>st</sup> February 2004, before taking a permanent position at that organisation.
- D. Nick Hulme commenced at the Trust on 16<sup>th</sup> December 2002.

The senior managers named above have not given consent to the disclosure of their ages. Benefits in kind relate to benefits for expenses claims and lease cars. There were no pension payments made for directors, or former directors, other than from the NHS pension scheme. No remuneration was waived by directors, no allowances were paid in lieu and there were no payments in respect of golden hello's or compensation for loss of office.

## Management Costs

	<b>2003/04</b> £'000s	<b>2002/03</b> £'000s
Management costs	5,882	5,611
Income	149,246	137,491
Management costs as a percentage of income	3.9%	4.1%

Management costs are as defined in the document "NHS Management Costs 2002/03". For more information, please [click here](#) to visit the Finance section on the Department of Health website.

The increase of 4.8% was within the permitted increase for two star Trusts of 7.2%.

The Trust complied with the national policy on pay for senior managers.

## Public Sector Payment Policy

The NHS Executive requires that Trusts pay their non-NHS trade creditors in accordance with the CBI "[Better Payment Practice Code](#)" and Government Accounting rules.

The target is to pay non-NHS creditors within 30 days of receipt of goods or a valid invoice (whichever is the later), unless other payment terms have been agreed with the supplier.

The Trust's position for 2003/04 is as follows:

	2003/04		2002/03
	Number	£'000s	£'000s
Total bills paid in the year	58,680	52,879	54,701
Total bills paid within target	36,584	32,235	28,238
Percentage of bills paid within target	62.34%	60.96%	51.68%

## **Directors' Statement**

The full Statement of Directors' responsibility in respect of internal control can be found in the Trust's Annual Accounts. No significant control issues arose during the year.

## **Independent Auditors' Report**

### **Independent Auditors' Report to the Directors of Ashford and St Peter's Hospitals NHS Trust on the Summary Financial Statements:**

This report is made solely to Ashford and St Peter's Hospitals NHS Trust Board, as a body, in accordance with section 2 of the Audit Commission Act 1998. Our audit work has been undertaken so that we might state to Ashford and St Peter's Hospitals NHS Trust Board those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than Ashford and St Peter's Hospitals NHS Trust and Ashford and St Peter's Hospitals NHS Trust Board, as a body, for our audit work, for this report, or for the opinions we have formed.

#### **Respective responsibilities of directors and auditors**

The Directors are responsible for preparing the Annual Report. Our responsibility is to report to you our opinion on the consistency of the summary financial statements with the statutory financial statements. We also read the other information contained in the Annual Report and consider the implications for our report if we become aware of any misstatements or material inconsistencies with the summary financial statements.

#### **Basis of opinion**

We conducted our work in accordance with Bulletin 1999/6, "The auditor's statement on the summary financial statements" issued by the Auditing Practices Board for use in the United Kingdom.

#### **Opinion**

In our opinion, the summary financial statements are consistent with the statutory financial statements of the Trust for the year ended 31<sup>st</sup> March 2004 on which we have issued an unqualified opinion.

Signed by KPMG LLP, Chartered Accountants, London on the 22<sup>nd</sup> July 2004.

## **Auditors' Remuneration**

The Trust's auditors, KPMG LLP, charged £98,000 for Audit Services in 2003/04. There was no remuneration for Further Assurance Services or any Other Services.

Audit Services included:

- Auditing the Accounts
- Financial Governance
- Management Arrangements
- Acute Portfolio Reviews
- Spot Check Audit

## Contact Information

### Hospital Addresses

Ashford Hospital

<p>London Road, Ashford, Middlesex, TW15 3AA</p>
<p>Switchboard: 01784 884488</p>

St Peter's Hospital

<p>Guildford Road, Chertsey, Surrey, KT16 0PZ</p>
<p>Switchboard: 01932 872000</p>

### Useful Telephone Numbers

Appointments Centre	01784 884351	Ashford
Charitable Donations	01932 722330	St Peter's
Childcare Co-ordinator	07880 738631	
Complaints: <a href="mailto:complaints@asph.nhs.uk">complaints@asph.nhs.uk</a>	01784 884871	Ashford
	01932 722612	St Peter's
Facilities (estates, cleaning, catering) Services Help Desk	01784 884585	Ashford
	01932 722882	St Peter's
Friends of the Hospital	01784 884649	Ashford
	01932 723867	St Peter's
Housing Co-ordinator	01932 722985	St Peter's
Information (IT) Services Help Desk	01932 723588	St Peter's
Library & Information Services	01784 884314	Ashford
	01932 722047	St Peter's
Patient Advice and Liaison Service (PALs) – <a href="mailto:pals@asph.nhs.uk">pals@asph.nhs.uk</a>	01932 723553	St Peter's
Training & Development	01932 722558	St Peter's
Voluntary Services	01784 884227	Ashford
	01932 722259	St Peter's

### Wards

Key	Ashford	St Peter's
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<b>Arnold</b>	01784 884571	<b>Ash</b>	01932 722395	<b>Birch</b>	01932 723246
<b>Bronte</b>	01784 884572	<b>Cedar</b>	01932 722003	<b>Chaucer</b>	01784 884573
<b>CCU Ashford</b>	01784 884537	<b>CCU St Peter's</b>	01932 722484	<b>Dickens</b>	01784 884574
<b>Eliot</b>	01784 884575	<b>Elm</b>	01932 722010	<b>Falcon</b>	01784 882372
<b>Fielding</b>	01784 884576	<b>High Dependency Unit</b>	01784 883509	<b>Holly</b>	01932 722011
<b>ITU St Peter's</b>	01932 722135	<b>Joan Booker</b>	01932 722660	<b>Juniper</b>	01932 723220
<b>Keats</b>	01784 884577	<b>Kestral</b>	01932 722201	<b>Labour</b>	01932 722361
<b>Kingfisher</b>	01932 722380	<b>May</b>	01932 722014	<b>Merlin</b>	01784 884013
<b>Oak</b>	01932 722016	<b>Maple</b>	01784 882287	<b>Shakespeare</b>	01784 884111
<b>Wordsworth</b>	01784 884578	<b>Day Surgery (Ashford)</b>	01784 884488 extn. 4127	<b>Day Surgery (St Peter's)</b>	01923 872000 extn. 2033

## Job Opportunities

Join a winning team! If you are interested in working for Ashford & St. Peter's Hospitals, whether full or part-time we have a variety of positions available and can offer rewarding careers to those who want to develop their skills. Call our recruitment line on 0870 4441354, visit [NHS Jobs](http://NHSJobs) for details of our latest vacancies or e-mail [jobs@asph.nhs.uk](mailto:jobs@asph.nhs.uk)

## Other Useful Contacts

Further information about Ashford & St. Peter's Hospitals NHS Trust and local health services can be found at:

NHS Website	<a href="http://www.nhs.uk">www.nhs.uk</a>
NHS Direct	<a href="http://www.nhsdirect.nhs.uk">www.nhsdirect.nhs.uk</a>
Department of Health	<a href="http://www.dh.gov.uk">www.dh.gov.uk</a>
Dr Foster	<a href="http://www.drfooster.co.uk">www.drfooster.co.uk</a>
Surrey and Sussex SHA	<a href="http://www.surreysussexsha.nhs.uk">www.surreysussexsha.nhs.uk</a>
Royal Surrey County Hospital	<a href="http://www.royalsurrey.nhs.uk">www.royalsurrey.nhs.uk</a>
Frimley Park Hospital	<a href="http://www.frimleypark.org.uk">www.frimleypark.org.uk</a>

<a href="#">Health Promotion Service</a> – The White House, Addlestone	01932-854476
HM Coroner at Addlestone	01932 205460
Hounslow Community Health Council	020 8568 8558
<a href="#">Hounslow Primary Care Trust</a>	020 8321 2201
Minor Injury Unit – Walton Community Hospital	01932 220060 ext 4210
<a href="#">NHS Direct</a> (24 hours a day / local call rates)	0845 46 47
NHS Walk-In Centres - Woking Community Hospital	01483 776080
NHS Walk-In Centres - Weybridge Community Hospital	01932 826013
<a href="#">North Surrey Primary Care Trust</a> (covering Elmbridge (western part), Runnymede, Spelthorne, Woking)	01932 872010
North West Surrey Local Research Ethics Committee	01932 723890
Registrar of Births, Deaths & Marriages at Weybridge	01932 254360
<a href="#">Windsor, Maidenhead and Ascot Primary Care Trust</a>	01753 636801
<a href="#">Woking Area Primary Care Trust</a>	01483 715911