



Annual members' meeting

2020/21



Chairman (interim)







Agenda

- Apologies and minutes: Steve Gill
- Annual report 2020/21 and review of the year: Lesley Watts (Chief Executive Officer)
- Finances and annual accounts 2020/21: Virginia Massaro (Chief Financial Officer)
- External audit report: Deloitte LLP
- Council of Governors report 2019/20: Simon Dyer (Lead Governor)
- Presentation: Research, innovation and community engagement during COVID-19:
 Dr Sadia Khan (Consultant, Cardiology) and Dr Marta Boffito (Consultant, Clinical Trials)
- Your questions
- Closing remarks







Lesley Watts

Chief Executive Officer

Note: Some photos throughout this presentation are pre-COVID-19







An exceptional year











COVID-19











COVID-19:

Positive learning









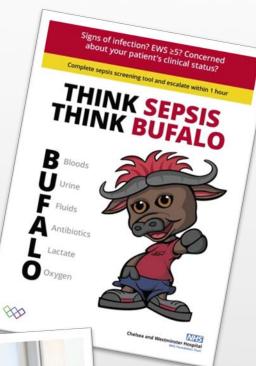






Our quality

























Our sustainability











Staff vaccination programme













Pop-up centres













Thank you to all our community











Chief Financial Officer







What is an annual report?









Summary financial performance in 2020/21









Statement of comprehensive income 2020/21

	2020/21	2019/20
	£000	£000
Operating income from patient care activities	631,632	603,795
Other operating income	120,902	106,115
Operating expenses	(755,818)	(665,596)
Operating surplus from continuing operations	(3,284)	44,314
Finance income	-	927
Finance expenses	(5,759)	(5,712)
PDC dividends payable	(9,674)	(10,456)
Net finance costs	(15,433)	(15,241)
Other (losses)/gains	8	(444)
Profit on assets and liabilities transferred in respect of the	(1,480)	
discontinued operations of the investment in joint ventures		-
Share of profit of associates/joint arrangements	357	909
Surplus/(deficit) for the year	(19,832)	29,538







Statement of comprehensive income 2020/21 (continued)

	2020/21 £000	2019/20 £000
Adjusted financial performance (control total basis)		
Surplus/(deficit) for the year	(19,832)	29,538
Remove net impairments not scoring to the department expenditure limit	24,702	(11,352)
Remove I&E impact of capital grants and donations	(2,482)	(6,868)
Remove 2018/19 post-audit PSF reallocation (2019/20 only)	-	(910)
Remove net impact of inventories received from DHSC group bodies for COVID response	(798)	-
Adjusted financial performance surplus	1,590	10,408







Exceptional items in 2020/21







Capital programme

In 2020/21 we invested £46.3m in capital—some key highlights:



Critical care project (£6.9m)



Ward upgrades (£2.4m)



ICU surge capacity at both sites (£4.3m)



A&E including resus at West Mid (£2.2m)







Capital programme (continued)



IT infrastructure and digital (£3.1m)



COVID-19 response (£3.8m)



Medical equipment upgrade (£8.3m)



Estates refurbishment and maintenance(£8.3m)







2020/21 in numbers

12 million minutes of

Zoom meetings



4,312 COVID-19 patients admitted



15m items of PPE distributed at the Trust



6,821 staff



96% of staff given COVID-19 vaccination



12,000 lateral flow tests distributed to staff







Deloitte LLP

Auditor





Deloitte.



Chelsea and Westminster Hospital NHS Foundation Trust External audit report to the Governing Body on the audit of the Trust's financial statements for the year ended 31 March 2021

Issued on 16 July for the meeting 22 July 2021

Summary of audit

We have completed the external audit of the Trust for the year ended 31 March 2021. This report includes information on our approach and opinion.

This presentation summarises the findings of our external audit of the Trust's financial statements for the year ended 31 March 2021. In line with the revised guidance, we did not complete testing on the Quality Report this year due to Covid-19.

Responsibilities of the external auditor

1

Financial statement audit

We issued an unmodified ("clean") opinion for the year ended 31 March 2021 financial statements, including the remuneration report. In reaching our conclusions, we addressed the following significant risk areas:

- · Existence of accruals and deferred income
- Property valuation
- Management override of controls

2

Use of resources

We are required to consider the arrangements that the Trust has made for securing financial resilience and economy, efficiency and effectiveness in its use of resources, if we identify any significant weaknesses to make recommendations, and to provide a narrative commentary on arrangements. We have not identified any risks of significant weakness in arrangements to secure economy, efficiency and effectiveness in the use of resources.

3

Annual Governance Statement

Reporting by exception if the Annual Governance Statement is incomplete or inconsistent with our understanding. We did not identify any issues requiring comment in our audit opinion.

We provided a detailed report on our audit of the Trust's financial statements to the Trust's Audit and Risk Committee and Board in June 2021. On 24 June 2021, we signed our audit opinion on the Trust's financial statements.

We have issued an unmodified audit opinion, with no reference to any significant weaknesses in respect of the Trust's arrangements to secure economy, efficiency and effectiveness in the use of resources. The full opinion on the financial statements can be found in the Annual Report.

J,



Council of Governors report 2020/21

Simon Dyer

Lead Governor

Note: Some photos throughout this presentation are pre-COVID-19







What does the Council of Governors do?









Membership, engagement and recruitment









Election results and non-executive director appointments/reappointments







Get in touch

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Dr Sadia Khan

Consultant, Cardiology

Dr Marta Boffito

Consultant, Clinical Trials







Research

- March 2020: Redeployment to COVID-19
 - Recruitment of:
 - 80 patients into recovery
 - 250 patients into study: Remdesivir versus standard of care for severe Coronavirus disease—2019 infection: An analysis of 28-day mortality (open forum infection diseases, in press)
- Pioneer study set up
- July 2020: Back into the CRF



20 years of antiviral development experience









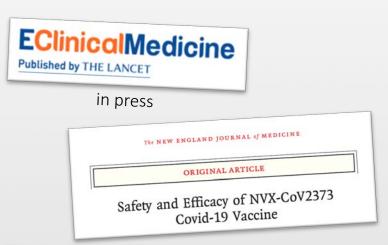
W valneva

COVID-19 vaccine development

Phase I/II (40)

• Phase III (570)

• Phase III (120)



VLA2001

- Inactivated
- Adjuvanted with Alum and CpG 1018
- Highly-purified
- Whole virus candidate
- Vero-cell based
- Using the manufacturing platform of Valneva's
- Commercial Japanese encephalitis (JE) vaccine



Community engagement **NWL** taskforce







Today and tomorrow

COVID-19

- Continue with vaccine development (boosters)
- New antivirals
- Monoclonal antibodies

Community engagement NWL taskforce

Other specialties



Infectious disease



Paediatrics/neonatal



Obstetrics/gynaecology



Gastrointestinal



Mental health



Metabolics/diabetes



Cardiology



Dermatology



HIV



Respiratory



Oncology

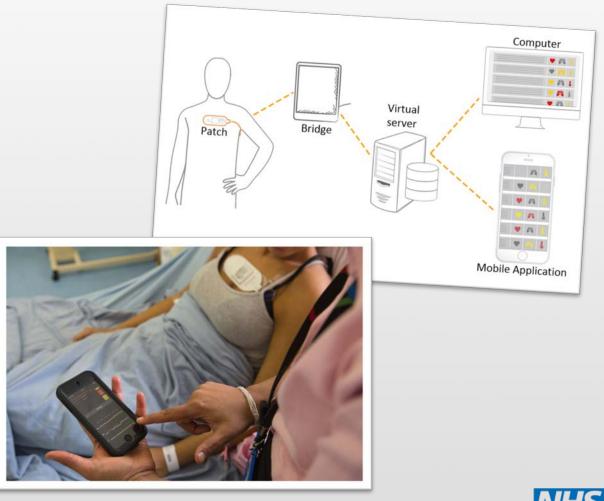






Remote monitoring

- Patient deterioration a significant problem in all healthcare systems
- Nationally mandated tools
- Treatment can be time-critical









Care without walls

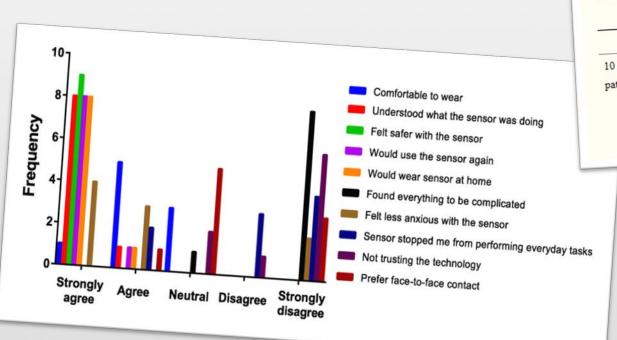


Table 2 Clinical events following alerts Events Alert Management 10 vital alerts in 4 patients Abnormal temperature reading (1 episode) Abnormal respiratory rate reading (9 episodes) Electrodes reapplied (1 episode)







The virtual ward









Lessons learned

- Rapid learning and adoption
- Rigorous testing
- Persistence
- Whole community effort















Your questions

Steve Gill

Chairman (interim)







Closing remarks

Steve Gill

Chairman (interim)







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