



PUBLIC VERSION

SERVICE YEAR:
2021/2022



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1. foreword

We are pleased to share our first Annual Report, which provides a summary of our performance during the 2021/22 financial year.

In accordance with the Manx Care Act (2021), this Annual Report describes how Manx Care exercised its functions during 2021/22, including an assessment of the extent to which it met the objectives and requirements specified within the Department of Health and Social Care's (DHSC) Mandate.

The Mandate details the requirements of Manx Care as the Department of Health and Social Care's (the 'Department' or 'DHSC') provider of health and care services, setting out the services required, the funding available and the obligations and limitations of the delivery of the services. It forms the basis on which services required to be delivered are described and mandated by the Department to Manx Care. The Required Outcomes Framework (ROF) is Manx Care's response to that, and outlines a set of indicators and standards to monitor performance, drive transparency and accountability, and improve quality outcomes. It also details some important key commitments for Manx Care in developing credible plans for improvement over the course of 2021/22.

We set ourselves some ambitious targets, and aimed to make substantial progress during the first year operating as an independent organisation at arm's length from the DHSC, whilst also recognising and accepting that it will take a longer period of time to fully deliver and embed all of the recommendations from Sir Jonathan Michael's independent review into the provision of health and social care on the Isle of Man. During 2021/22, the Manx Care Board identified three priorities on which it would focus during its first year:

1. Improving the quality and safety of service
2. Improving the culture of the organisation
3. Improving the financial health of the organisation

The service improvements that have been made have been delivered during what proved to be an extremely difficult and challenging period, as we continued to respond to the demands of the global Covid-19 pandemic, working alongside the Island's community and the wider Government to ensure the safety of our residents. Despite the challenges, we can evidence progress against our ambitions to enhance patient, service user and carer experience, create a continuous learning culture, improve safeguarding of our adults, children and younger people, and improve access to our services.

We recognise that improving the culture of the organisation will take time, but we believe we have made a positive start on our commitment during year one. We have listened to – and we will continue to listen to – our colleagues and ensure that, as far as is possible, we act on what we hear. We have reviewed our organisational Care Values to ensure they resonate with and are reflective of the views of our colleagues, and reflect what is important to the future of Manx Care. We are committed to open and transparent communication with our colleagues, our patients, services users and their carers, and are committed to co-production and taking a partnership approach to all that we do.



Managing our finances has proven to be extremely challenging during our first year. We ended the year having sought additional funding from Treasury in order to support our expenditure on some items which we are not able to predict or influence the cost of, for example rising drugs costs, high-cost patients, difficulties recruiting substantive staff and thus a costly reliance on Agency/Bank staff, and the cost of managing Covid. A huge amount of work has been done to understand our expenditure and manage our costs, and we remain fully committed to operating within our allocated budget. We expect to make significant progress in this regard, with further focus around our Cost Improvement Programme during 2022/23.

As with the Required Outcomes Framework, the intended audience for this document is broad, and includes our people, our patients and service users, their families and carers, service partners, and the Manx community, all of whom have an important role to play in making Manx Care a success.



Andrew Foster CBE
Chair, Manx Care



Teresa Cope
CEO, Manx Care



chairman's report

Reflecting on the first year of Manx Care, I think back to my first update to the newly established Manx Care Board in April 2021. This reported on the newly established Governance arrangements of the Manx Care Board and outlined a baseline position for the organisation across the domains of Quality and Safety, People and Culture, Finance and Performance, and Data and Digital. It laid the foundations for the Board to move towards its core purposes of strategy, scrutiny and assurance. We chose three main priorities – improving patient safety, improving culture and improving financial health – and these remained the cornerstone of our focus throughout the year.

The Required Outcomes Framework also highlighted that there was much work to do on improving safety across our services, and accordingly the majority of Year One commitments related to this.

In our first months, travel restrictions remained in place and our early Board meetings were held virtually, but we were able to hold our first meeting in public on 27 July 2021. The impact and the effect of the pandemic has been well documented and I don't intend to dwell upon it here, save to say that its impact was unprecedented. We managed the situation to the best of our abilities and it has provided valuable learning for Manx Care. I pay enormous tribute to so many colleagues who more than rose to the challenge in terms of our response to the pandemic.

It is abundantly clear to me that everyone who works for Manx Care deserves full recognition for the hard work and commitment displayed, and all that they did to continue to provide services to residents of the Isle of Man throughout the year. The first phase of the restoration and recovery activity, which required us to address the inevitable increase in waiting lists, continues to make good progress, and we hope that the second phase will be rolled out later in 2022.

During the year we said 'goodbye' to our colleague, Vanessa Walker, who passed away in January 2022 following a period of illness. As a Non-Executive Director, Vanessa was a remarkable find, bringing so many different skills and perspectives to the Board. First and foremost she was a Nurse, with that caring profession at the centre of everything she did. Vanessa worked tirelessly to ensure those groups that were under-represented in society were given a voice. The Board lost a great member, the Island lost a great friend and we all lost a great person.

On behalf of the Board, I would like to take this opportunity to pay tribute to the dear colleagues we also sadly lost during the year, many of whom have devoted their lives to delivering exceptional care to the people of the Isle of Man. In order to maintain their privacy, and that of their families, we have chosen not to name them publicly. However, I would like to recognise their contributions and the role that they played in our first year.

I would also like to offer my personal thanks to our Director of Infrastructure, Barbara Scott, who retired in July 2022. Barbara moved to the Island 26 years ago, following many years of service as a Nurse in the UK. She played a leading role in the supply of PPE during the Covid-19 pandemic, as well as establishing the swabbing and testing facility at the Grandstand in Douglas in April 2020, and the launch of the two vaccination hubs in January 2021. Barbara made a significant contribution to the lives of many of our colleagues, as well as many Manx residents, during the course of her career. She will be greatly missed by everyone in Manx Care, and we wish her the very best for her well-deserved retirement.



Next year will be different, but also challenging as we continue to strive to innovate and to provide a more joined-up, integrated health and social care system for the Isle of Man. I would like to take this opportunity to thank all of our colleagues for their tireless work and unyielding dedication to all of our patients and service users during our first year, and look forward to embracing the opportunities the coming year will undoubtedly bring.



Andrew Foster CBE
Chair, Manx Care



ceo report

I am pleased to share Manx Care's first Annual Report. It is a comprehensive read, and will help members of the public to understand the journey that the organisation is going on in order to transform the way that health and statutory social care is delivered on the Island, and support us in achieving our goal to be the best small Island health and care system in the world. We set ourselves some ambitious targets, and aimed to make substantial progress during our first year of operating as an independent organisation at arm's length from the Department of Health and Social Care (DHSC), whilst also recognising and accepting that it will take a longer period of time to fully deliver and embed all of the recommendations and improvements from Sir Jonathan Michael's independent review into the future provision of health and care on the Island.

In Year One we can evidence strong progress against our priorities of improving the quality and safety of the services that we deliver. These improvements have been delivered against the challenging backdrop of continuing to respond to the demands of the global Covid-19 pandemic. Our remarkable and dedicated colleagues are our greatest asset and have demonstrated significant resilience and compassion in their commitment to their roles, working alongside the Island's community, our delivery partners and the wider Government to ensure the safety of our residents.

I am encouraged by the progress and the feedback on our commitment to improve the culture of the organisation, including listening and acting on feedback from our colleagues and partner organisations, promoting leadership visibility and engagement, implementing wellbeing opportunities and rolling out the Manx Care Leadership in Practice Academy as a key development programme. We recognise that establishing a positive and inclusive working culture takes time and we will continue to work hard and focus on this across all levels and parts of the organisation.

Manx Care ended the year under review, having sought additional funding from Treasury in order to support our expenditure on some items which we are not able to predict or influence the cost of, for example rising drug costs, high-cost patients and the cost of managing Covid. A huge amount of work has been done to understand expenditure and manage costs across the organisation, and I would like to thank every colleague who has been involved in what has been an extensive exercise.

The year under review was very much a year of discovery, establishing a baseline from which to develop across all services, and making a number of changes that should help the organisation to achieve success in Year Two and beyond. Members of the public will see a significant amount of progress being made across the 2022/23 financial year, and I hope that you will continue to provide your input and feedback to help us shape the range of services we provide.



Teresa Cope
CEO, Manx Care



2. our corporate structure

the manx care board

About Manx Care

Manx Care was established with effect of the Manx Care Act 2021, with the organisation being authorised on 01 April 2021.

The Board is of a unitary nature with 11 statutory, voting Directors recognised as filling the roles described in Schedule 1 of the Act.

Non-Executive Directors

Andrew Foster CBE, Chair
Sarah Pinch, Vice Chair
Andy Guy
Katie Kapernaros
Nigel Wood
Vacancy¹

Executive Directors

Teresa Cope, Chief Executive Officer
Dr. Sree Andole, Medical Director
Jackie Lawless, Director of Finance
Paul Moore, Director of Nursing and Governance
Sally Shaw, Director of Social Care

Tenure

Non-Executive Directors were appointed by a process of open competition for the role, starting in late 2020, with recruitment activity and initial meetings of the Shadow Board all being conducted virtually due to the pandemic and the lockdown restrictions that were in place in the Isle of Man at that time.

During the year under review, the Board was very sorry to lose a valued colleague, Vanessa Walker, who passed away following a period of illness. A recruitment process has recently concluded to appoint a new Non-Executive Director, with the appointment having been approved by Tynwald in July 2022.

In addition to these Directors, the senior management team reporting to the CEO includes four non-voting Directors and the Board Secretary, with the portfolios set out below:

- Anne Corkill, Director of HR Business (OHR Shared Service)
- Oliver Radford, Director of Operations
- Barbara Scott, Director of Infrastructure²
- Richard Wild, Director of Digital & Informatics
- John Middleton, Board Secretary³

Note 1: The vacant Non-Executive Director position was held by Vanessa Walker until her resignation in December 2021 on the grounds of ill health

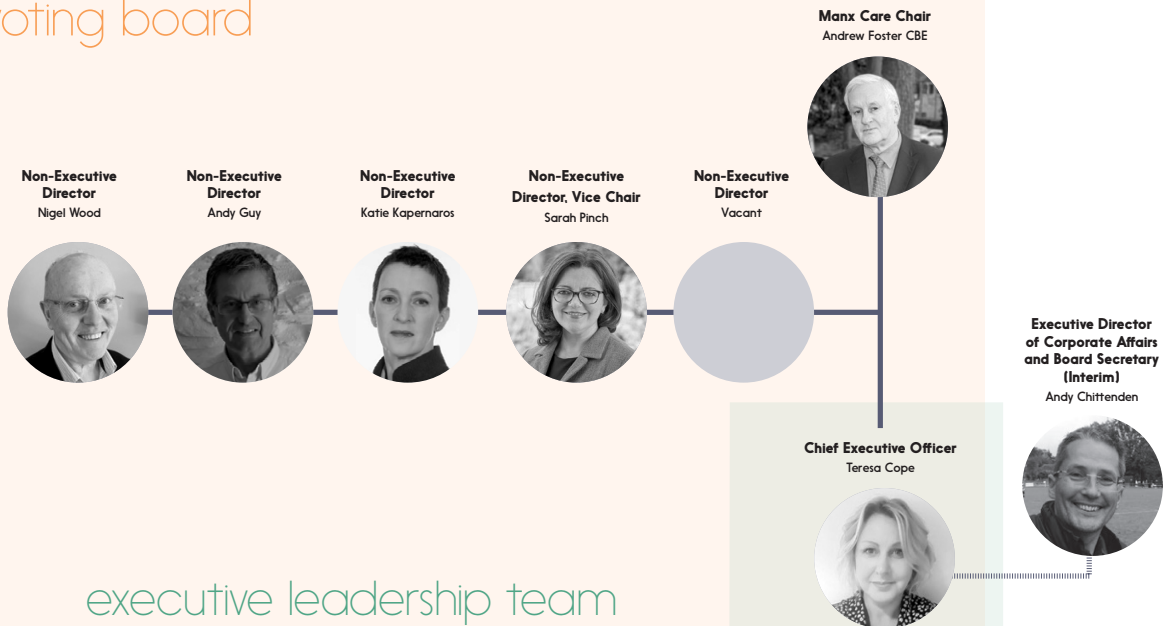
Note 2: Barbara Scott subsequently retired from Manx Care, on 29 July 2022. A replacement has been recruited for her position

Note 3: John Middleton resigned from Manx Care on 22 November 2021. On 24 January 2022 he was replaced by Andy Chittenden who assumed the role of Executive Director of Corporate Affairs on an interim basis, which included responsibility for the Board Secretariat portfolio.



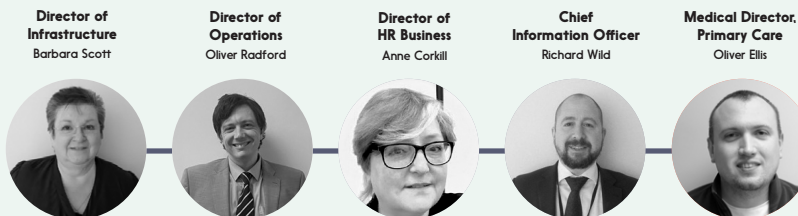
board structure

voting board



executive leadership team

non-voting





board biographies



Andrew Foster CBE
Chair

Andrew was appointed in September 2020 having just concluded a number of executive roles for NHS England, including Executive Lead for Leadership, Interim Managing Director of the Leadership Academy, chairing the work on Leadership Culture as part of the NHS People Plan and managing the programme to bring back retired staff to help in the fight against Covid-19. He is a Non-Executive Director at Health Education England and Trustee of ENT UK.

Previously he was Chief Executive at Wrightington, Wigan and Leigh NHS Foundation Trust (WWL) from January 2007 to October 2019. His main interests have been quality and staff engagement, with a particular desire to learn from the best health systems in the world. WWL developed a significant reputation for all-round performance, whilst also achieving almost all major targets and enjoying financial stability. It won many national and regional awards including HSJ Provider Trust of the Year in 2014. It is rated 'Good' by the CQC in all domains, for all sites and for Use of Resources.

Before WWL, he spent five years as the NHS Director of Human Resources (Workforce Director General) at the Department of Health with principal responsibility for implementing the workforce expansion and HR systems modernisation set out in the NHS Plan of 2000. Previously he spent two years as part time Policy Director (HR) at the NHS Confederation. Andrew was also the Chairman of WWL NHS Trust from 1996 to 2001 and, before that, Chairman of West Lancashire NHS Trust and Non-Executive Director at Wrightington Hospital NHS Trust.



Teresa Cope
CEO

Teresa Cope worked in the NHS in England before moving to the Island in December 2020 to take up the role as Chief Executive of Manx Care. Teresa began her NHS career as a Diagnostic Radiographer. During her clinical career, she was a Clinical Lecturer for the Royal Military College of Science (Cranfield University) based in Oxfordshire training undergraduate Radiographers in their clinical placements across the local area, and later lecturing on CT Scanning at Sheffield Hallam University. Her last clinical Radiography role was Superintendent Radiographer for United Lincolnshire Hospitals.

She subsequently moved into general management, fulfilling roles across a broad number of specialities including Surgery, Critical Care, Theatres and Cancer and Diagnostics Services. She undertook a number of external reviews on behalf of the East Midlands Strategic Health Authority on waiting list irregularities, and was part of an advisory panel on the procurement of Independent Sector Diagnostics for the region.

In 2008, she moved into High Secure Forensic Mental Health Services upon her appointment as General Manager for Rampton High Secure Hospital. She was also part of the core team leading Nottinghamshire Healthcare NHS to achieving Foundation Trust status and expanding its services into Offender Healthcare Provision.



From there, she moved to Nottingham City Clinical Commissioning Group (CCG) as the Director for Quality, Contracting and Delivery, joining when the CCG was in shadow form and progressing through the authorisation process and becoming one of only a handful of Allied Health Professionals nationally who held the quality portfolio lead for the CCG. She also oversaw establishment of the System Resilience Group and Urgent and Emergency Care Transformation Programme for the Nottinghamshire and Derbyshire system.

In 2015, Teresa assumed the Chief Operating Officer (COO) role at Humber NHS Foundation, an integrated Mental Health, Community Services and Primary Care provider covering a large geography, and led a number of transformation programmes before becoming COO of Hull University Teaching Hospital. The Trust provided a range of tertiary services and was a Major Trauma Centre, Cancer Centre, Cardiac Centre and regional Infectious Diseases (ID) Centre. In January 2020, she also assumed its Covid-19 Gold Commander role following Hull diagnosing the first two UK cases of Covid-19 in its ID unit. As well as leading the operational delivery of the Trust, she chaired the A&E Delivery Board, and was Vice Chair of the Regional Radiotherapy Network and Integrated Care System (ICS) Lead for Endoscopy and Diagnostics Transformation.

Teresa supported production of Channel 5's 'A&E After Dark' documentary following night shift teams at Hull Royal Infirmary. Its aim was to show the outstanding, compassionate and dedicated work of its Emergency Department (ED) during some exceptionally challenging situations and generate a greater level of understanding from the public, and other parts of the health and care system, on the demands placed on the ED. A second series was commissioned following the success of the first.



Sarah Pinch
*Non-Executive Director,
Board Vice Chair*

Sarah Pinch is Vice Chair and a Non-Executive Director of Manx Care, and chairs the People Committee.

Sarah is MD of Pinch Point Communications (PPC), an Independent Advisor to The Senedd, Trustee of Bristol Students' Union and Chair of the Taylor Bennett Foundation.

Starting as a BBC journalist, she has worked in corporate communications since 2000, in-house for Christian Aid, Children's Hospice South West, First Group plc and the NHS. She founded PPC in 2013 and the agency works across all sectors, specialising in all areas of change management, staff engagement, strategic communication and issues and crisis management.

She launched Spring Forward in 2018, an annual conference aimed at women who want to run the show, was President of the Chartered Institute of Public Relations in 2015 and served five years as a Non-Executive Director of the Health and Safety Executive. In March 2022 she was nominated for Women in PR's inaugural '45 Over 45' list of outstanding women in communications.

Sarah lives in Bristol with her young family, and is married to a Manxman. She enjoys visiting the Isle of Man through her family connections. She started running six years ago and is evangelical about its benefits.



Katie Kapernaros
Non-Executive Director

Katie Kapernaros is a Non-Executive Director for Manx Care and chairs the Digital and Informatics Committee.

She is an experienced executive in the IT industry, spending most of her career at IBM managing large operational teams and budgets. She has lived and worked in Australia, Singapore and the UK, and has managed teams across the world. One of her notable projects was working on the Sydney Olympics.

Katie now has a portfolio of Non-Executive roles in the public sector covering digital, property and health organisations. She has done a lot of voluntary work in the charity and sports arenas, and is a Fellow of the British Computer Society, where she also volunteers on some of their committees.



Andy Guy
Non-Executive Director

Andy Guy is a Non-Executive Director for Manx Care and chairs the Audit Committee and the Mental Health Act Legislation Committee.

He moved to the Isle of Man over 20 years ago with his family. He initially trained as a Pharmacologist and retains a deep interest in health and medicine. He has ten years of medicine research experience with one of the world's largest pharmaceutical companies, working on anxiety and depression initially, and then exclusively on learning and memory dysfunction as it relates to dementia. He has a PhD in Neurophysiology where his thesis explored the brain pathways and mechanisms of spatial memory.

Upon moving to the insurance industry, Andy re-trained as a Life Assurance Underwriter for a global life insurance company, spending a considerable period as Research Underwriter managing life, serious illness and long-term sickness risk, helping to translate medical advances into better underwriting practice and lower premium rates. He has held two 'Chief Underwriter' positions and continues to offer an underwriting consultancy service.

Andy has sat on two Isle of Man Government independent boards, with over ten years' experience in those roles. He was a Member of the Independent Review Body (IRB) dealing with complaints against the NHS, chairing the IRB for half of his ten-year tenure which came to an end in late 2019. He was also a member of the Health Service Consultative Committee, with oversight areas including integrated care and Programme for Government as it applied to the National Health Service.

He holds a firm belief that Manx Care is the beating, caring heart of society and represents just what can be achieved by a civilisation when people work together to create something they all want.



Nigel Wood
Non-Executive Director

Nigel Wood is a Non-Executive Director for Manx Care and chairs the Finance, Performance and Commissioning Committee.

A proud Manxman and Manx resident, Nigel is a British Chartered Accountant and is Principal Director of Harley Partners, his own boutique consulting practice founded in 2013. He is a retired Trust and Estates practitioner (TEP) and international tax practitioner (ITPA). He continues to enjoy a broad and varied career in the Isle of Man's Financial Services sector.

In 1981 he moved from a Chartered Accountancy practice to join the IOMA Group, a privately owned Risk and Financial Services Group, and has experience in International Life Insurance, Reinsurance, Captive Insurance, Trust and Corporate Services, Closed Ended Funds and high-level governance. He was formerly a shareholder and Group Managing Director for 13 years, having been Finance Director for 14 years prior to that.

He has served as a Non-Executive Director of two substantive Alternative Investment Market (AIM) listed companies on the London Stock Exchange, chairing the Audit Committee of one of those. He is an Executive Director (and Shareholder) of an International Life Insurance Company based in The Bahamas, and Chairman and shareholder of Ascentiom, an Island-based recruitment company run by his son Guy. Until July 2020 he was the Chairman of the Board of Governors of King William's College and the Buchan School, and remains a Governance Council member.

Nigel has been privileged to speak at a number of global conferences, and has supported Isle of Man Government roadshows. He is married to Lorraine; together they have three adult children and four granddaughters. His interests include travel, cycling, walking, sailing, down-hill skiing, music, nature and the outdoors.



Dr. Sreeman Andole
Executive Medical Director

Dr. Sreeman Andole, fondly known by his friends as 'Sree', is a Stroke Consultant and carried out his specialist training in London. He joins Manx Care from Kings College Hospital in South London. Sree is also Assistant Medical Director for NHSE/I, and is an interim Medical Director for the East of England Ambulance Service NHS Trust, as a part of the National Improvement Team for challenged systems.

Sree has worked in several regional and national roles including the Clinical Standards Committee for the British Stroke Association, a Committee member for the Clinical Reference Group, within Neurosciences UK, as Specialist Advisor for the Care Quality Commission (CQC), a Governance Body member for Southend CCG, and is a member of the MBRRACE-UK (Mothers and Babies: Reducing Risk through Audit and Confidential Enquiries) collaboration. He is currently a NICE expert advisor for stroke treatment update guidelines, as well as for the LINQ cryptogenic stroke monitor. In addition to this, he is an Associate Professor of Stroke Medicine.

Sree has worked across Primary, Secondary and Tertiary care settings with GPs, hospital doctors and other service providers, and has previously played a key role in acute service reconfigurations in London and South East Essex in the UK. He has won several awards including the Stroke Association Professional Excellence award in 2018, was HSJ Clinical Leader of the Year finalist in 2013 and HSJ BME Pioneer of the Year in 2013.

Outside of work, Sree loves dogs and has a passion for curries!



Paul Moore
*Executive Director of
Nursing and Governance*

Paul Moore joined Manx Care from Stockport NHS Foundation Trust where he led on quality governance, risk and safety management and assurance. With over 32 years' experience in the NHS, this is Paul's sixth Executive Director post having also previously worked at Wirral University Teaching Hospitals NHS Foundation Trust, Sherwood Forest Hospitals NHS Foundation Trust, St George's University Hospitals NHS Foundation Trust and the University Hospitals of South Manchester (UHSM). He brings to the team leadership expertise, experience in overcoming quality and safety concerns, and also building a culture of high ambition, high-quality care and organisational resilience.

Paul is focused on engaging and empowering front-line teams to deliver better health, better care and value. He has an interest in improvement science and believes success is achieved through a proactive, anticipatory and highly adaptive approach to care. His unique and innovative model for quality governance won the HFMA's Governance Award in 2011, and his approach to safety management led to UHSM (in 2013) and Wirral (in 2020) achieving Gold Awards from the Royal Society for the Prevention of Accidents. He graduated in Nursing from the Victoria University of Manchester in 1997 and specialised in emergency and trauma nursing. He completed the Institute for Healthcare Improvement's Patient Safety Officer's Executive Development Program in 2008 (Boston, Massachusetts), acquired a Master of Science degree in Healthcare Management from Manchester Business School in 2012, and completed the Risk and Corporate Leadership Executive Development Programme at Harvard Business School in 2014.

He has sat on the National Institute for Health and Clinical Excellence and National Patient Safety Agency's Patient Safety Advisory Committee, and the National Health Service Litigation Authority's Risk Management Forum. He has published a number of papers and presented at many international conferences and symposia, including at the 2005 United Kingdom Presidency of the European Union Patient Safety Summit.

Paul is retained as a Special Advisor to the Care Quality Commission in England and Wales. He is also currently developing the Quality and Safety Module for the upcoming Executive Director Pathway commissioned by the NHS Leadership Academy.



Sally Shaw
*Executive Director
of Social Care*

Sally Shaw began her career in North West England in 1986 as a Nursing Assistant in a long-stay hospital that supported children and adults with a learning disability, going on to qualify as a Registered Nurse in 1991. She worked both as a Community Nurse for children with disabilities and then as a Resettlement Nurse, supporting the closure of the hospital and supporting the development of community-based models of care and support.

Having moved to work for a Local Authority in Warrington, she began to study at Salford University and graduated as a Qualified Social Worker in 1997. After this, she was instrumental in bringing together a large multidisciplinary community-based team to support adults with learning disabilities, managing the social work provision of this team. Whilst in this post, the Authority became a Unitary Authority and so Sally led on the development of emergency out-of-hours social work provision alongside her substantive post. She continued to both provide management support and cover frontline shifts to support the development of the service and to maintain her registration for several years.

In 2005, she took on a significant piece of transformation activity for the Authority in respect of the then contract and commissioning arrangements and practices for all learning disabilities services, before moving into the Third Sector working across England and Wales.



Following her relocation to Scotland, in 2011 she began a senior post in Shetland and soon had the opportunity to take on a joint role between the Health Board and Local Authority as Interim Director of Community Care before taking a senior role in 2013 within the Care Inspectorate in Scotland, the scrutiny and improvement body within the Scottish care sector. During this time, she led on the joint inspections of health and social work services across adult service provision with colleagues in Health Care Improvement Scotland, before moving back into operations in 2017, with significant experience in developing integrated health and social care services.

She has worked closely with the European Social Network, predominantly collaborating on aging and disability-related issues.



Jackie Lawless
Finance Director

Jackie Lawless moved to the Isle of Man in 2020 and has extensive experience in various sectors, sizes and types of organisations including Government, construction, housing and medical device manufacture. Her career has taken her across the world, with periods spent living and working in Ireland, Belgium, Japan, Israel and the UK.

Jackie sees the role of Finance Director as being to provide financial information and insight that supports organisations in making good, solid decisions. She has significant experience in driving and implementing change, and encouraging a culture of continuous improvement by getting the best from systems, processes and people.

Jackie is a keen motor-racing and classic car enthusiast, and enjoys both practising and teaching creative crafting.



Oliver Radford
Director of Operations

Oliver Radford grew up in Lancashire and has a BSc degree in Physiology from the University of Leeds and an MSc in Health Informatics from the University of Manchester. He started working for the NHS in 2004 as a Clinical Governance Manager at Central Manchester University Hospitals NHS Trust, as one of the first people dedicated to embedding the principles of clinical effectiveness within clinical services.

He moved to his first service management position in 2007, taking over the management of the Anaesthetic Directorate which, at the time, employed 60 Consultant Anaesthetists. By the time he left the role in 2014, that number had increased to more than 90 consultants. During his time in Anaesthetics, Oliver also oversaw

the construction of a new Critical Care complex which had 52 beds across three separate units. Following his period within Anaesthesia and Critical Care, he accepted a 12-month secondment with the Central Manchester Trust's Transformation Team, overseeing transformation activity across all elective services, concentrating on improving theatre efficiency. He concluded his UK NHS career with a 12-month position leading the Manchester Head and Neck Centre, which provides specialist Head and Neck Cancer and Audiology services for Greater Manchester.

In 2016, Oliver moved to the Isle of Man to take up the role of Surgical Divisional Manager at Noble's Hospital, before moving to become General Manager for Unscheduled Care at Noble's and, most recently, Integrated Community Care Group Lead.



Barbara Scott
Director of Infrastructure

Beginning her career in nursing in the UK, Barbara Scott worked in Intensive Care for many years before moving to general surgery where day case, Endoscopy and five-day ward services were developed to maximise patient experience, and improve quality and throughput.

This success led to her project managing and commissioning a new combined Day Case and Endoscopy Unit with its own theatre complex with funding from the Mersey region. She was subsequently appointed to the Surgical Divisional services as Contracts Manager following Halton's move to Trust status. This was an exciting time to develop the Trust into a successful

business model with low waiting lists, and the ability to be creative in managing the hospital and providing services.

Barbara moved to the Isle of Man following the birth of her second daughter and stayed at home for 12 months before accepting a part-time nursing post offering insight into the Island's Health and Care system, and fuelling her desire to play a role in its future change. She was appointed Deputy Hospital Manager in 1998 and led the move to the new Noble's Hospital site in 2003, becoming Hospital Manager in 2006. In 2016, she moved to undertake the commissioning of the Salisbury Street Care Home in Douglas, alongside a number of other projects.

Appointed as Director of Infrastructure for the Department of Health and Social Care (DHSC) in 2017, Barbara played a leading role in developing a shared service model with the Department of Infrastructure (DOI), which she found as rewarding as it was challenging. She prides herself on bringing a different perspective to her role, developing her department from a functional buildings service to one focused on meeting client needs. The Director of Infrastructure remit allows her to play a critical role in shaping the development of Manx Care's transformation agenda.



Dr. Oliver Ellis
*Medical Director,
Primary Care*

Oliver is Chair of the Isle of Man Primary Care Network, and is a non-voting member of the Manx Care Board. Oliver's appointment will support one of Manx Care's strategic focuses which is to strengthen the relationship with our Primary Care practitioners on the Island and drive forward the transformation of our services.

Oliver qualified from Leeds Medical School in 2012 with an MbChB and an MA in Biomedical Ethics. He was Student Editor at the British Medical Journal (BMJ) in 2010-2011. He moved to the Isle of Man to work as an F1 doctor in 2012. He worked as a Clinical Fellow for the Mental Health Service in 2014 and is approved under Section 12 of the Mental Health Act.

Oliver trained as a GP on-Island, qualifying in 2018. He worked as a GP partner at the Laxey and Village Walk practices before moving to Peel Group Practice as a GP partner in January 2021.

He has experience of many of the clinical areas within our Island's health and social care service including Medicine, Orthopaedics, General Surgery, Psychiatry, Drug and Alcohol services, Emergency Department, Paediatrics, Obstetrics and Gynaecology, Hospice, MEDS (Manx Emergency Doctor Service) and General Practice.

His wife is a physiotherapist, and together they have two children and two cats. He has a passion for cookery and science fiction novels.



Richard Wild
*Chief Information
Officer*

Born and raised on the Isle of Man, Richard Wild graduated from the University of London with an MSc in Advanced Computer Science and began his career at Demon Internet in 1994 as a computer programmer. With expertise in internet development, he subsequently moved to California and worked with one of the world's largest e-retailers as Chief Technical Architect.

Returning to the UK in 2002, Richard became the Lead Security Architect at the Cabinet Office and moved to the Department of Health in 2004. In this role, he became a respected expert in confidentiality, privacy and information risk management. He was a trusted advisor to Dame Fiona Caldicott, the National Data Guardian, and was the Director of her two Caldicott reports on

confidentiality and data security.

Returning to the Island in 2015, Richard joined the Department of Health and Social Care and was lead author of its 'Health and Social Care in the next five years' strategy published that year. He moved to the Cabinet Office in 2017 as Executive Director of Government Technology Services, before joining Manx Care in January 2021 as Chief Information Officer.

Outside of work, Richard is a skipper for Sailing for the Disabled charity and a regular competitor in the Island's Parish Walk, having completed the challenge a number of times, and with a fastest finish of 16 hours and three minutes!



Anne Corkill
*Executive Director
of HR Business*

Anne Corkill is Director of HR Business for Manx Care. She has a long-standing career working for Isle of Man Government across a number of sectors and departments.



Andy Chittenden
*Executive Director of
Corporate Affairs and
Board Secretary (interim)*

A biochemist (BSc) and Parasitologist (MSc) by original qualification, Andy worked and lived abroad in Kenya and Papua New Guinea in the 1980s, and more latterly in Qatar (Head of Governance in Qatar NHS, 2013/14) as well as travelling extensively in Eastern Europe marketing laboratory instrumentation in the 1990s.

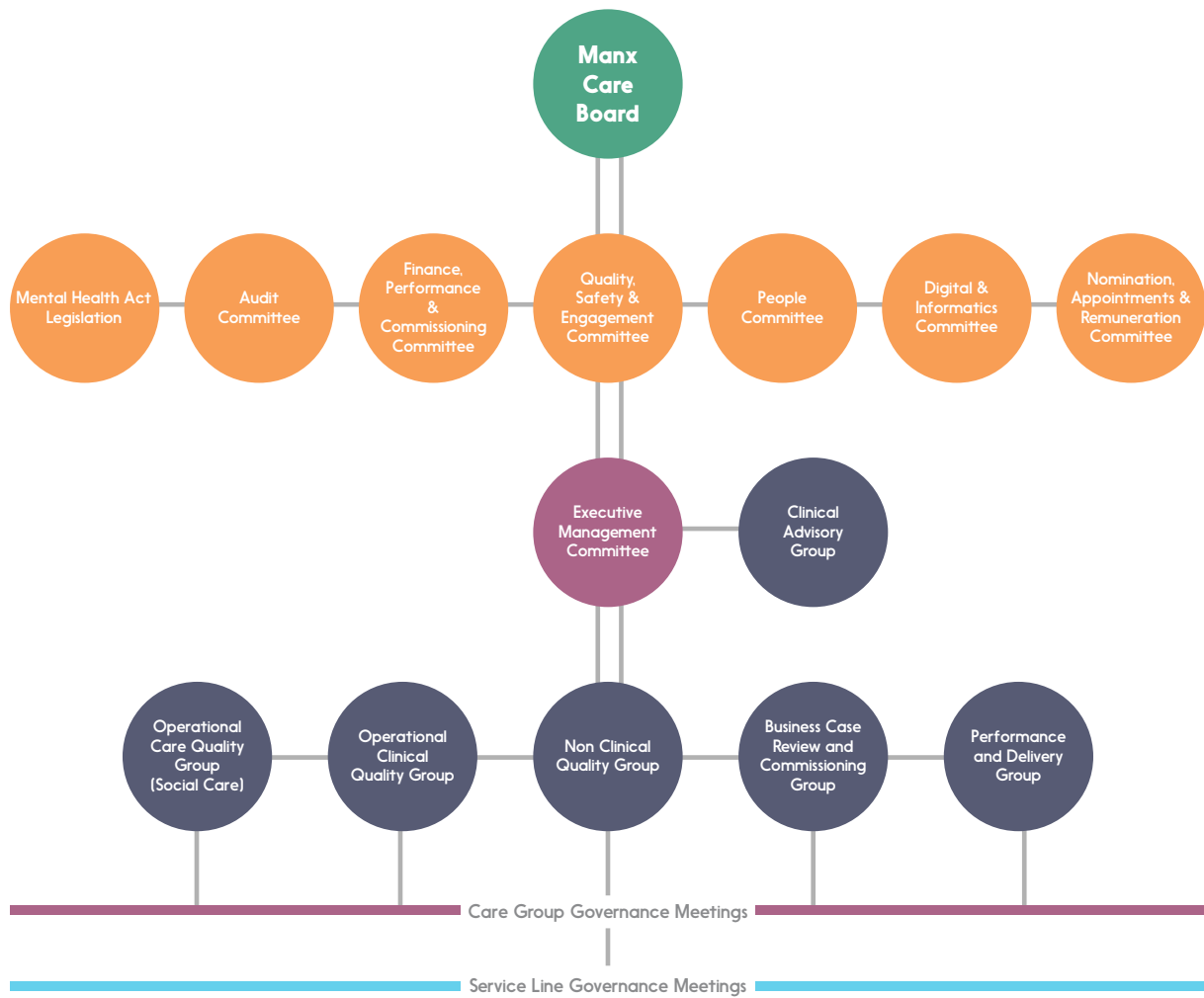
Andy took his MBA through the Open University between 1994 and 1997 and qualified as a Chartered Company Secretary with ICSA, being elected to Fellow in 2012. He has been involved in charity governance for more than 20 years, and joined the NHS in 2007, firstly as Company Secretary at Wirral University Hospitals NHS Foundation Trust, and then at the University Hospitals of South

Manchester NHS Foundation Trust. He established his own consultancy in 2014 and has undertaken many consultancy and interim appointment contracts since.

Andy doesn't focus his work in the Governance sector 100% of the time. For example, he ran an industrial design, innovation and rapid prototyping bureau at Liverpool University between 1998 and 2002 and ran the Liverpool Anglican Cathedral between 2003 and 2007.



board to service governance structure





how the board works

The Board works in accordance with the principles of a unitary Board in which, whilst in the Boardroom, each Director carries the same and equal legal responsibilities as the others for the decisions taken.

Outside of the Boardroom, the Non-Executive and Executive roles differ widely, not only in time commitment and remuneration, but also in the degree of delegated responsibility for operational matters. These differences are highlighted in the table below.

The roles of Directors within a unitary Board:

Inside the Boardroom: All directors acting collectively as 'The Board'

1. Establish and communicate the values and behaviours underpinning organisational culture.
2. Determine the organisational strategy from amongst options provided / recommended by the Executive.
3. Allocate resources using budgets.
4. Monitor performance using an integrated performance report / *balanced scorecard*.
5. Hold the Executive to account, exercising constructive challenge.

Outside the Boardroom: Non-Executive directors meeting periodically to exercise independent oversight:

Using a risk-based approach, acquire and scrutinise assurances* that the system of internal controls is well designed, consistently applied and operating effectively, thereby gaining confidence that objectives will be met.

** 'assurance' is taken to mean the elimination of doubt through the provision of multiple documented sources of data and information, some of which may be independent of management e.g. Peers, stakeholders, regulators.*

Outside the Boardroom:

CEO and Exec Team use detailed knowledge to:

1. Cultivate the culture.
2. Establish the operational controls by which organisational objectives are met.
3. Hold management to account.



the board's work

During the year under review, the Board met monthly. Although Covid restrictions prevented it from meeting in a public setting initially, the Board made efforts to ensure that where possible, Board meetings were not only held in a public setting, but also live streamed, with the live stream being recorded and made available to view via YouTube. During the year under review, four Board meetings were held in a public setting and these remain available to view on YouTube.

The Board has established six Committees, each of which undertakes a process of scrutiny into the system of internal control. These are:

- Quality, Safety and Engagement
- Finance, Performance and Commissioning
- Digital & Informatics
- Audit
- People
- Mental Health Act Legislation

The work of the Committees is to seek and scrutinise assurances that the systems by which Manx Care is controlled on a day to day basis are appropriately designed, consistently applied and operating effectively. Where such assurances are available, the Board takes confidence that the objectives are likely to be met.

Audit

The Committee's overarching duty is to provide assurance to the Board that there are effective systems of governance across the health and statutory social care services delivered by Manx Care which lead to better outcomes for patients and service users. The Committee will review the effectiveness of the other Board committees within Manx Care, whose work can provide relevant assurance on the effectiveness of that governance system.

Finance, Performance and Commissioning

The Finance, Performance and Commissioning Committee assists in ensuring that Board members have a sufficiently robust understanding of key performance and financial issues to enable sound decision-making. The committee monitors financial and operational performance, CIP (Cost Improvement Programme) delivery and Restoration and Recovery activity. It also oversees the performance of the commissioning and contracting functions, as well as financial planning and budget setting. It highlights risks and areas for consideration and provides reports to the Board on key issues.

Quality, Safety and Engagement

The Quality, Safety and Engagement Committee provides scrutiny and challenge with regard to all aspects of the quality of care, and clinical and professional safety. This includes care strategy and delivery, clinical and professional governance, patient, public and service user engagement, clinical and professional audit, and research in order to obtain assurance and make appropriate reports or recommendations to the Board.



People

The People Committee provides scrutiny and challenge with regard to all aspects of people, engagement, workforce and organisational development (OD) planning. This includes workforce strategy and delivery, clinical and professional training, and colleague engagement in order to obtain assurance and make appropriate reports or recommendations to the Board.

Digital and Informatics

This Committee provides advice and assurance to the Board in relation to the direction and delivery of digital and informatics strategy development and information governance, to drive continuous improvement and support IT-enabled health and social care to achieve the strategic objectives of the Manx Care Board. The Committee seeks assurance on behalf of the Board in relation to Manx Care's arrangements for the development and effective management of data and information to support a fit and proper system of performance management and business intelligence, in line with the Board's strategic objectives. The Committee will seek assurance on behalf of the Board in relation to Manx Care's arrangements for appropriate and effective management and protection of information (including patient and personal information), in line with legislative and regulatory responsibilities.

Mental Health Act Legislation

The Mental Health Act Legislation Committee is responsible for ensuring Manx Care is working within the legal requirements of the Isle of Man Mental Health Act (1998), and with reference to guiding principles as set out in the Code of Practice and associated legislation as it applies to the Mental Health Act. It has an oversight of related risks, providing additional scrutiny of any such risks and giving assurance to the Board around the management of such risks.



statement of internal control

As Accountable Officer for Manx Care, the Chief Executive Officer (CEO) has overall responsibility for the management of the risks to the achievement of the strategic aims, whilst safeguarding public funds and departmental assets. Consequently the CEO is responsible for ensuring that a sufficient and appropriate system of internal control is maintained across the area, by which these risks are managed. The CEO has ensured that each Head of Division responsible for strategic delivery within the area has completed the required Self Review Questionnaire in order to gain appropriate information and assurances that the system of internal control that is relied upon to manage risks is adequate, enabling the CEO to give reasonable assurance that risks are being appropriately managed and to identify any improvements that may be required.

The purpose of the system of internal control

The system of internal control is designed to manage risk to a reasonable level rather than to eliminate all risk of failure to achieve policies, aims and objectives. It can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of the policies, aims and objectives of Manx Care to evaluate the likelihood of those risks being realised, and the impact should they be realised, and to manage them efficiently, effectively and economically.

The Risk and Control Framework

Risk is the effect of uncertainty on the delivery of objectives. When identifying risk we anticipate what could stop us from achieving our goals. To help identify risk we look at our historic performance and trends, previous events, current challenges, and needs of the people who use our services, both now and in the future. Risk analysis involves estimating the severity (the impact the risk has on Manx Care, and the people in our care) and likelihood (the probability of that impact happening). The scores are multiplied to give an overall risk rating. The risk rating is used to determine risk management priorities and monitor acceptable amounts of risk. Risk management is an integral component of Manx Care's Quality Governance Framework.

Manx Care's governance framework is supported by a risk management system that aims to deliver continuous improvements in safety and quality, and maximise opportunity for growth and development. Risk management provides a solid foundation upon which to build a culture of high reliability wherein clinical and organisational excellence can flourish.

The Board Assurance Framework

The key risks to the delivery of Manx Care's strategic objectives are identified in the Board Assurance Framework, with the key risks impacting on the operational performance being identified in the Corporate Risk Register. The Board Assurance Framework provides the mechanism for the Board to monitor risks and controls, and the assurances that controls are effective. The Board recognises the importance of the Board Assurance Framework in mitigating Manx Care's strategic risks. During 2020/21, the Board Assurance Framework was reviewed by the Board, and sections reviewed by the relevant Board committees.



Information Governance

Manx Care identified that Information Governance is an area of significant risk and, in order to understand the levels of risk, a review of the Information Governance function within Manx Care was undertaken by KPMG in its position as the Cabinet Office's appointed health and care transformation partner. The executive summary of the report contained a number of findings and recommendations, which have been reflected in the programme of work that Manx Care has developed.

An Information Governance Advisory Board (IGAB) was established and is chaired by the CEO. The Digital and Informatics Group, along with the Non-Clinical Quality and Safety Group, meet bi-monthly and reports on performance are provided to IGAB, along with other established groups, within and external to Manx Care.

The IGAB approved the development of Manx Care's compliance-based programme based on the standards of the Data Security and Protection Toolkit which can be benchmarked against a National NHS compliance standard.

Information Governance Training is a mandatory training module for all employees within Manx Care.

From the period April 2021 to December 2021, there were seven significant information governance and data security breaches where patient identifiable information was shared with a number of groups and sub-groups, many of whom were not involved with that patient and their care. These were reported to the Information Commissioner's Office which resulted in enforcement action being taken against Manx Care. Policies and procedures have been introduced to remediate and mitigate the risk of such breaches occurring in the future.

Board-level and programme-level risk registers have been recorded and reported through Manx Care's reporting groups and reported to the Senior Information Risk Owner (SIRO)/ Chief Information Officer who represents the Information Governance function at Board level.


Data Quality and Governance

Having the right information about the right patients, available to the right people in real time in order to make informed decisions is essential in providing high quality, integrated health and care services that reflect the needs of the population both now, and for future generations. Currently Manx Care has a large number of systems which are resource intensive. Waiting list data is acknowledged as being an area requiring improvement. Manx Care needs to engage and develop patient confidence and trust in its services, ensuring data is safe and secure whilst encouraging research and innovation through partnerships which improve patient outcomes through appropriate information sharing.



manx care board meeting attendance, 2021/2022

	27 April 2021	25 May 2021	24 June 2021	27 July 2021	24 August 2021	02 September 2021	14 September 2021	28 September 2021	26 October 2021	23 November 2021	21 December 2021	25 January 2022	22 February 2022
Andrew Foster	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present
Andrew Guy	Present	Present	Present	Present	Not Present	Not Present	Present	Present	Present	Present	Present	Present	Present
Katie Kapernaros	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present
Sarah Pinch	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present
Vanessa Walker	Present	Not Present	Present	Present	Not Present	Present	Present	Present	Present	Not Present	Present	Not Present	Not Present
Nigel Wood	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present
Teresa Cope	Present	Present	Present	Present	Present	Not Present	Present	Present	Present	Present	Present	Present	Present
Cath Quilliam	Present	Not Present	Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present
Paul Moore	Not Present	Not Present	Not Present	Not Present	Not Present	Present	Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present
Jackie Lawless	Present	Present	Present	Present	Present	Not Present	Present	Present	Present	Present	Present	Present	Present
Sree Andole	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present
Sally Shaw	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present
Richard Wild	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Not Present
Oliver Radford	Present	Present	Present	Present	Present	Present	Present	Present	Not Present	Present	Present	Not Present	Present
Barbara Scott	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Not Present
Clare Conie	Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present
Anne Corkill	Not Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present	Present
John Middleton	Present	Present	Present	Present	Present	Present	Present	Present	Present	Not Present	Not Present	Not Present	Not Present
Oliver Ellis	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Present	Not Present
Andy Chittenden	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Not Present	Present	Present

Present 
Not Present 



3. how our services are led

Our services are delivered through a Care Group structure, supported by a broader corporate team. There are seven Care Groups in total.

With the exception of Social Care, all follow the same management structure with a lead doctor (Clinical Director), a lead Nurse or Allied Health Professional (Matron) and a General Manager. Social Care is led by a lead Manager across its different divisions.

The Care Groups are outlined below, with a summary of the work that each delivers overleaf:

care groups



MEDICINE, URGENT CARE
AND AMBULANCE SERVICE



SURGERY, THEATRES,
CRITICAL CARE AND
ANAESTHETICS



INTEGRATED DIAGNOSTICS
AND CANCER SERVICES



INTEGRATED MENTAL
HEALTH SERVICES



INTEGRATED WOMEN'S,
CHILDREN'S AND
FAMILIES SERVICES



INTEGRATED PRIMARY
AND COMMUNITY
CARE SERVICES



SOCIAL CARE
SERVICES



medicine, urgent care and ambulance



What do we deliver in our Care Group?

MEDICINE:

- // Cardiology
- // Gastroenterology and Hepatitis C
- // Neurology
- // Rheumatology and Osteoporosis
- // Day Assessment and Treatment Unit (DATU)
- // Anti-Coagulation
- // Respiratory
- // Ward 1 – Acute Medical Unit
- // Ambulatory Emergency Care (incorporating Acute Oncology services)
- // Ward 6 – Geriatrics
- // Ward 7 – Stroke
- // Ward 9 – Respiratory
- // Coronary Care Unit (CCU)
- // Ward 21 – Renal and Nephrology
- // Martin Ward – Ramsey and District Cottage Hospital

URGENT AND EMERGENCY CARE:

- // Emergency Department
- // Minor Ambulatory Care Unit
- // Manx Emergency Doctor Service
- // Minor Injuries Unit– Ramsey and District Cottage Hospital

AMBULANCE SERVICE:

- // Emergency response
- // Patient conveyance
- // Helicopter Air Ambulance Service

Care Group Management Structure

General Manager:	Mark Cox
Head of Ambulance Service:	Will Bellamy
Matrons:	Dr. Lyz Howard, Martin Hamm
Clinical Directors:	Dr. Gareth Davies, Dr. Ishaku Pam



surgery, theatres, critical care and anaesthetics



What do we deliver in our Care Group?

THEATRES:

- // Elective and 24-hour emergency care

GENERAL SURGERY – SURGICAL SPECIALTIES

- // Ear, Nose & Throat
- // Oral Surgery
- // Plastics & Dermatology
- // Breast Service

ORTHOPAEDICS

DAY PROCEDURE SUITE

- // 18-bed ward, open five days per week
- // All surgical specialities: Cardiology, General Surgery, Endoscopy, ENT, Ophthalmology, Oral Surgery and Urology
- // Elective medical procedures: Diagnostic Radiology, ECT and Infusion/ Transfusions

ENDOSCOPY SUITE

- // Open five days per week

PRE-ASSESSMENT CLINIC (PAC)

- // Covering procedures on the Isle of Man and at tertiary centres in the UK

STERILE SERVICES DEPARTMENT

- // Sterilisation and decontamination of a range of equipment Island-wide (including for other Government departments as appropriate)

OUTPATIENTS DEPARTMENT

- // Blood Clinic

PAIN MANAGEMENT SERVICE

- // A multi-disciplinary team including a part-time Consultant, part-time SAS, Clinical Nurse Specialist Non-Medical Prescribers, part-time Physiotherapist, part-time Consultant Health Liaison Clinical Psychologist, part-time Secretarial support and Bank staff
- // Nurse Led inpatient Pain Service
- // Outpatient Pain Management Service

CRITICAL CARE

- // Critical Care
- // Critical Care Outreach Team
- // Resuscitation & Informatics
- // Organ Donation liaison

FIXED-WING AIR AMBULANCE SERVICE

CLINICAL ADMINISTRATION

- // Medical Secretaries
- // Patient Information Centre

INPATIENT WARDS

- Ward 11 – Trauma
- Ward 12 – Orthopaedic Elective
- Ward 8 – Surgery
- Ward 2 – Surgery

Care Group Management Structure

General Manager:

James Watson

Matrons:

Stuart Hemingway

Clinical Directors:

Dr. Sivakumar Balasubramanian, Mr. Andre Risha



integrated diagnostics and cancer services



What do we deliver in our Care Group?

- // Full range of Cancer Services support, from initial diagnostic assessment through to treatment and support for patients in remission
 - / Alignment with the care delivered at tertiary centres in the UK (Clatterbridge @ Noble's model of care)
 - / Macmillan support
 - / Close working with charities and third sector organisations locally to ensure joined-up support and service development
- // Significant on-Island diagnostic capability, including X-Ray, CT and MRI scanning
- // On-Island Pathology Lab, based at Noble's Hospital
 - / This performs and reports results on more than 500 different types of tests every year
- // Acute Pharmacy department supporting hospital-based services (based at Noble's)
 - / Clinical (ward-based) service
 - / Aseptic and oral dispensing services
 - / Procurement and Supply
 - / Oncology Service support
 - / Antimicrobial support

Care Group Management Structure

General Manager:	Lisa Airey
Head of Cancer Services:	Theresa Faragher
Chief Pharmacist:	Craig Rore
Radiology Manager:	Kathleen McDowall
Head of Pathology:	Steve Doyle
Clinical Director:	Partha Vaiude



integrated mental health services



What do we deliver in our Care Group?

MANANNAN COURT:

- // Crisis and Home Treatment Team
- // Harbour Suite (18-65 years of age)
- // Glen Suite (over 65 years of age)
- // Pit Stop café

COMMUNITY-BASED SERVICES:

- // Older Persons Mental Health Service (over 65 years of age)
- // Community Mental Health Service for Adults (18-65 years of age)
- // Child and Adolescent Mental Health Services
- // Drug and Alcohol Team
- // Community Wellbeing Services & Psychological Therapies Service
- // Recovery College

Care Group Management Structure

General Manager:	Ross Bailey
Matron:	Dr. Mick Fleming
Clinical Director:	Dr. Marina Hudson



integrated women's, children's and families services



What do we deliver in our Care Group?

- // In-patient paediatric care
- // Outpatient paediatric clinics
- // Children's Community Nursing Team
- // Infant Feeding Team
- // Maternity services (in-patient and community)
- // Neonatal care (in-patient and outreach services)
- // In-patient gynaecology services
- // Outpatient gynaecology clinics
- // Sexual health services including GUM clinic, Family Planning services, Termination services
- // Health Visiting and School Nursing Service
- // Safeguarding Children and Adults service

Care Group Management Structure

General Manager:	Linda Thompson
Matron:	Liz Cullinane
Head of Midwifery:	Barbara Roberts
Clinical Director:	Dr. Pradumal Thakker



integrated primary and community care



What do we deliver in our Care Group?

PRIMARY CARE SERVICES

- // GP Contracting
- // Dental Contracting
- // Optical Contracting
- // Pharmaceutical Contracting
- // Orthodontic Services (Primary and Consultant Lead Service)
- // Community Pharmacy
- // Community Dental Service
- // Primary Care (NHS) Back Office
- // Medicines Optimisation Team

COMMUNITY SERVICES

- // Community Nursing Service – District Nursing
- // Long Term Conditions Co-ordinators, Parkinson’s Nurse, Learning Disabilities Nurse and Health Visitor for Vulnerable Adults
- // Prison Healthcare Service
- // Tissue Viability and Wound Management Service
- // Continence Advice Service
- // Manx Centre for Diabetes and Endocrinology
- // Therapies and Podiatry

Care Group Management Structure

General Manager:

Anmarie Cubbon

Matron:

Emma Cleator

Pharmaceutical Advisor:

Maria Bell

Associate Director of Primary Care:

Dr. John Snelling



social care services¹



Care Group Management Structure

Assistant Director, Adult Social Work:

Stephen Lonsdale

Assistant Director, Children's and Families:

Julie Gibney

Head of Operations, Adult Social Care:

Jonathan Carey

Head of Corporate Business:

Louise Hand

What do we deliver in our Care Group?

CHILDREN'S AND FAMILIES SERVICES

- // Fostering and Adoption support
- // Birth records counselling and tracing
- // Family finding for adoption and fostering
- // Fostering and adoption recruitment
- // Family days, support groups and forums
- // Training
- // Fostering and Adoption Panel
- // Out of Hours support, 365 days per year
- // Care management
- // Supporting children with disabilities
- // Initial response
- // Early help
- // Family placement
- // Resource Centres
- // Safeguarding and Quality Assurance
- // Supporting families
- // Youth Justice
- // Oversight of contracted services

¹ All roles outlined on this page report to the Executive Director of Social Care.



social care services



What do we deliver in our Care Group?

ADULT – OPERATIONAL SERVICES

- // Residential care for Older Adults and Adults with a Learning Disability
- // Residential Care for Older Adults with Dementia
- // Community Support Service (domiciliary care)
- // Reablement Service
- // Day Services for Older Adults and Adults with a Learning Disability
- // Respite Care for Older Adults and Adults with a Learning Disability
- // Learning Disability Supported Living
- // Learning Disability Supported Employment

ADULT – SOCIAL WORK SERVICES

- // Adult Generic Team
- // Adult Services Access Team
- // Community Older Peoples Team
- // Learning Disabilities
- // Hospital Discharge Team
- // Safeguarding
- // Wellbeing Partnerships

OPERATIONAL SERVICES: NUMBERS

- | | |
|--------------------------------|---|
| // Residential Care – 240 Beds | // Reablement – 500 referrals per year |
| // Dementia Care – 70 Beds | // OPS Day Services - approx. 375 services users per week |
| // LD Respite – 12 Beds | // LD Day Services – approx. 85 service users per day |
| // CSS – 120 service users | |



support functions

- **Contracts and Commissioning
(including Tertiary Care and Patient Transfers)**
- **Infrastructure**
- **Information and Digital**
- **Information Governance, including Data Protection**
- **Company Secretariat (Manx Care Whistleblowing Lead)**
- **Communications and Brand**
- **Programme Management**
- **Finance***
- **OHR (Office of Human Resources)***
- **GTS (Government Technology Services)***

** Finance, OHR and GTS are shared services.*



4. improving quality and safety

The provision of high quality, safe care is Manx Care's primary objective. The improvements achieved during the last year are best summarised under the following set of headings, which were identified within the Required Outcomes Framework:

- **Preventing Harm**

The Operational Clinical Quality Group (OCQG), with its associated reporting schedule, has been established in accordance with Manx Care's quality assurance framework, and has representation from six Care Groups. For clarity, Manx Care is internally organised into six Care Group structures, sitting alongside Social Care. Social Care has established an Operational Quality Group (OQG). The OCQG and OQG meetings take place monthly, with the OCQG co-chaired by the Executive Director for Nursing and Governance and the Executive Medical Director, and with the OQG chaired by the Executive Director for Social Care. Both committees report to the Quality, Safety & Engagement Committee of the Manx Care Board.

A Quality Dashboard, based on the CQC Key Lines of Enquiry (KLOE), has been developed and is updated monthly for the attention of the OCQG. To date the dashboard has relied on manual updates; however work is ongoing to automate metrics for the majority of indicators. Each Care Group has specific metrics and indicators to report against which feed into the overarching Manx Care position. A programme of Care Group reporting has been established whereby analysis of indicators is submitted, highlighting both positive assurance and gaps in assurance, and identifying actions to address areas that require improvement.

Since November 2018, the NHS Safety Thermometers have been recorded across all Adult Inpatient Wards. This looks at avoidable harm in hospitals around the key areas of pressure ulcers, falls, Urinary Tract Infections (UTI) with associated catheter and acquired Venous Thromboembolism (VTE). This has been adapted to include other relevant measures and Maternity, and Children and Young People Thermometers, have also been added. All are scoring consistently above the 95% threshold.

By 'shining a light' on specific areas of care through the Quality Dashboard, improvements and positive assurances have been realised, and consequently a number of areas have seen improvements during the year.

- **Enhancing patient, service user and carer experience**

Manx Care recognises that in order to provide a high quality patient and service user experience, it needs to actively seek, respond to and learn from feedback. Throughout the year Manx Care has been developing its range of interventions to enhance patient, service user and carer experience and to listen to and act upon patient and service user feedback to improve services.

Inpatient Surveys: More than 470 have been returned since April 2021. The aim is to obtain ten surveys each month from each inpatient area. Ninety-three percent of respondents were satisfied with their hospital experience.



Patient Safety Walks are undertaken across health facilities and services. 'Walks' are undertaken by senior personnel involving on-site structured conversations with patients, visitors and staff. Feedback is anonymised and submitted to the relevant Care Group or service, along with any recommendations to drive enhancements in quality and experience. Action plans are developed, implemented and monitored in line with recommendations to shape services that better meet patient needs. Between April 2021 and February 2022, 25 walks were undertaken.

Complaint Management: Since April 2021, response times have been monitored via the Quality Dashboard. The two-day target for complaint acknowledgment is set at 98%, with a year-to-date average achieving a positive result of 99%.

Manx Care is working hard to achieve the 20-day response target, as identified in the NHS Complaints Regulations, setting a target of 95%. The year to date average stands at 60%, although the second half of the year's average (75%) shows improvement on the first half (58%).

Since February 2022, Manx Care's Chief Executive has been reviewing and signing off complaint response letters to ensure Executive-level oversight, improve compliance with regulation and ensure the approach to responses is consistent and service-user focused.

Duty of Candour: In accordance with Duty of Candour (DoC) regulations and to ensure compliance with these, Manx Care implemented its associated DoC policy and procedure in April 2021.

DoC functionality has been activated in Datix, the Safety and Quality Risk Management System, to facilitate the recording of the assessment for each individual incident. However, some challenges have been experienced in Adult Social Care (ASC) with regard to the availability of a Registered Professional who can undertake the assessment (this reflects the fact that many staff working in ASC are not registered with a professional regulatory body).

In addition to standards identified in the DoC policy, Manx Care has introduced a ten-day target for writing to patients or service users impacted by a DoC incident to inform them of this, the plans for investigation, and to offer an apology. Compliance in respect of serious incidents is monitored via the SI Tracker overseen by the Serious Incident Review Group.

From January 2022 compliance with the ten-day target for all incidents is being reported via the Quality Dashboard, with 71% achieved in January 2022 and 100% in February 2022.

District Nursing Survey: Since October 2021, the service has issued questionnaires to all patients during home visits. All feedback is anonymous and includes questions on access and responsiveness of the service. The District Nursing Service received 123 patient survey responses between October and December 2021.

Manx Care Advice and Liaison Service (MCALS): In August 2021, the Manx Care Advice and Liaison Service launched as a six-month pilot, and has recently become a substantive service. For the first time this gives members of the public a direct helpline spanning both health and social care services. If someone has a query about Manx Care or its services, they can speak with the MCALS team in confidence who will point them in the right direction, put them in touch with the service they need to speak to, or give them other essential information they require. Data is captured and shared via weekly summaries and a monthly dashboard in order to drive service improvements, and help to shape the care quality agenda.



- **Creating a continuous learning culture**

Manx Care recognises that employees have a background in a wide range of disciplines and aims to agree a standardised improvement approach which will build capacity and capability to support continuous improvement.

A Safety and Quality Risk Management System Officer (Datix Administrator) has been appointed, enabling internal capability for system maintenance and development, reporting and training. The structure and security profiles within Datix have been subject to a review to ensure they are reflective of the organisational structure and compliant with GDPR.

In October 2021 the Manx Care Board signed off Manx Care's policy and procedure for Incident Reporting, Investigation and Learning developed by the Care Quality and Safety Team. The policy has resulted in the implementation of a robust procedure for the reporting and management of Serious Incidents in accordance with NHS England's Serious Incident Framework.

The Serious Incident Review Group (SIRG) meets weekly and is chaired by the Executive Director for Nursing and Governance and the Executive Medical Director, and has been established with senior leadership representation from across the organisation.

A positive reporting culture, evidenced through the use of Datix, has been developed across the organisation with Executive oversight for incidents involving severe harm or death enabled via automated email functionality. Action plans arising from SI investigations are overseen by the Care Quality and Safety Team in conjunction with the relevant Care Group triumvirate leadership team and associated governance committee.

Serious Incident training has been rolled out across Care Group leads to enhance investigation capability whilst ensuring consistent application of, and compliance with, the policy and procedures.

A Standard Operating Procedure (SOP) has been developed and implemented for Inquest Management, which followed consultation with the Coroner of Inquests, Coroner's Officer and the Attorney General's Office. This describes the process for the request and supply of evidence and enables Manx Care, via the Care Quality & Safety Team, to quality check that evidence provided is compliant with professional and legal standards.

A bi-monthly Manx Care Patient Safety Summit, chaired by the Executive Medical Director, has been introduced with invitations extended to all employees. The Summit invites guest speakers to present and share the outcomes and learning from incident investigations, audits, inquests, peer reviews and any other type of feedback. In order to establish links across the whole organisation, including contracted providers, discussions have commenced with the Primary Care Network so opportunities for wider learning can be maximised.

A Safety and Learning bulletin was introduced in February 2022 and is circulated across Manx Care on a monthly basis via the Communications Team. The bulletin, edited by the Care Quality and Safety Team, features a range of topics aimed at driving improvements in the safety culture across the organisation and the experiences of those who access services.



- **Safeguarding adults, children and young people**

A new arrangement has been developed creating a structure for Adult and Children's Social Care, led by an Executive Director who is a voting member of the Manx Care Board. This will strengthen the governance arrangement for social care and increase safeguarding capacity.

A Head of Safeguarding has been appointed to lead the Safeguarding Team, committed to enabling the safety of young people and adults who access Manx Care's services, and for staff within the services to be able to recognise signs of abuse and how to report it.

- **Improving access to services**

An Access Policy was developed during the second half of the year, which outlines the rules and regulations as to how Manx Care manages its access to services and monitors its waiting time. This policy begins to facilitate movement to 18-week Referral to Treatment Time monitoring and compliance, whilst also including some robust practical tools. Underlying processes are now in the process of being implemented, whilst funding has been secured for key roles to support the process and to ensure there is senior managerial oversight of the elective programme. Manx Care will continue to work to reduce waiting times across all services and ensure equitable, transparent and fair access.

In order to improve openness and transparency, and promote better engagement with the public, bi-monthly Board meetings are opened up to the public to attend, in addition to being streamed live via social media. This provides the opportunity for advanced submission of questions and topics for discussion.

- **Improving the effectiveness of services**

Manx Care is committed to improving outcomes for patients and service users. As part of that commitment, Manx Care will continue to develop closer links with regional academic partners to improve training and education and ensure effective and efficient links with providers of tertiary care.

In addition, Manx Care will participate in relevant national clinical audits and implement recommendations where possible. Manx Care continues to develop its digital strategy including opportunities for patients and service users to have digital (telemedicine) rather than face to face appointments where clinically appropriate.

As detailed within the Required Outcomes Framework, full and accurate coding of activity in health and care services is a critical enabler to safe and effective service delivery, achievement of targets, effective resource and performance management, and effective clinical governance. To support our aspirations in this regard, we have developed a clinical coding policy and supporting procedures, and the clinical coding function has subsequently been outsourced to a company that specialises in this field, which is able to provide the requisite resilience in order to safeguard future sustainable delivery of a clinical coding function for Manx Care.



5. service and performance developments

Response to the Covid-19 pandemic

Manx Care played a central role in the provision of Covid-19 related services and supporting the Isle of Man population through the pandemic, and successfully led the vaccination programme delivering initiatives as advised by the Joint Committee on Vaccination and Immunisation (JCVI). We delivered swabbing and testing capacity of up to 1,000 swabs and tests per day and provided a secure supply chain of personal protective equipment (PPE) and Lateral Flow Devices to the Island.

Integration

The development of the Wellbeing Partnerships has taken a positive step forward following the establishment of Manx Care, accompanied by the commencement in post of the three Wellbeing Partnership Leads. Highlights during the year include:

- Transfer of the responsibility for the Wellbeing Partnerships into Social Care from Community Health
- Beginning the development of the Southern and Northern Wellbeing Partnerships, with formal launch of the Southern Wellbeing Partnership in December and public consultation sessions for the development of the Northern Partnership
- The Western Wellbeing Partnership continuing to support the local population through coordination of referrals, ensuring an integrated approach to the provision of care either at home or as close to home as possible, as well as providing a local venue for the delivery of services such as Community Midwifery, Podiatry and the Memory Clinic, and services from Government departments including a benefits drop-in session
- Initial planning getting underway for the development of the Eastern Wellbeing Partnership

In a separate programme, Local Area Co-Ordination – which is a multi-agency programme chaired by Manx Care's Executive Director of Social Care – saw two Local Area Coordinators appointed to cover the southern region. They will lead on the development of the foundation level of integrated care, namely building an engaged and connected community that supports its local population.

The Community Frailty project began in early 2021/22; however, progress has been limited due to lack of community Geriatrician availability. This will improve from April 2022 when two new substantive Consultant Geriatricians join the workforce. The development of care pathways and a Comprehensive Assessment document have been finalised which will be used to assess frailty both in the community and in hospital.

Care pathways and job descriptions have been progressed in order to support a new model for Intermediate Care, which includes both community and bed-based care, but progress has been limited due to the availability of funding. This will now be sought as part of the wider Urgent and Emergency Integrated Care Transformation business case, with a current expectation that this will progress early in the 2022/23 financial year.



Performance

There has been a new focus and fresh impetus on performance across all services, such as cancer, and both elective and non-elective activity. The development of the Integrated Performance Report has tracked performance since April 2021, which is overseen by the Finance, Performance & Commissioning Sub-Committee of the Manx Care Board, and the Performance Delivery Group, a subgroup of the Executive Management Committee.

Urgent and Emergency (Non Elective) Care

Performance across all non-elective standards has been challenging in-year due to a significant increase in demand on the non-elective pathway, in particular calls to the Ambulance Service and to MEDS. Although attendances at the Emergency Department (ED) were stable during 2021/22, conversion rate from attendance to admission has increased by 7%, meaning more demand on inpatient capacity and increased instances of exit block in ED which has impacted on four-hour performance.

Work to develop an Ambulatory Emergency Clinic (AEC) has helped to deflect admissions, whilst further work on the Urgent and Emergency Integrated Care Transformation Project will develop diversionary pathways to reduce pressure on ED due to the presence of practitioners with advanced clinical skills in the community.

Important developments in-year include:

Cancer Care: Stabilisation of the two-week wait cancer standard following some significant performance variance within several tumour groups in early 2021/22. Significant resilience issues have been identified across several tumour sites, and funding for additional capacity has been allocated in order to improve performance and outcomes. This includes funding of a second Consultant Breast Radiologist, allocation of recovery funding to Endoscopy to reduce historic waiting lists and improve the suspected cancer 'direct to test' pathway, and increasing the number of Colposcopy clinics in Gynaecology. Investment in the Cancer Tracking Team has resulted in increased oversight and the proactive co-ordination of all cancer patients going through diagnosis and treatment. Manx Care has also invested in additional nursing posts in its Oncology Service so is able to provide timely Chemotherapy to patients working within the 'Clatterbridge @ Noble's' service.

Planned (Elective) Care: In July 2021, Manx Care was awarded £1.86m of Treasury funding to deliver its 'Restoration and Recovery of Elective Activity' programme to begin to address the lengthy waiting lists it inherited across several clinical specialisms, which were further exacerbated by Covid-19. By February 2022, the Endoscopy waiting list of around 450 people had been cleared thanks to a solution delivered internally within Manx Care; since then, 350 patients have had their cataract pre-assessments and 150 have had their surgery thanks to a partnership with Synaptik. Patients across seven clinical specialisms have been offered the choice of having a telemedicine assessment through a partnership with Medefer, and a number of young people on the Child and Adolescent Mental Health Service (CAMHS) waiting list have been offered the option of having their psychological therapy treatment with a professional from the Isle of Man-based charity, Minds Matter. In addition, Manx Care worked with Synaptik to develop plans to deliver hip and knee surgery to some of those patients on the Orthopaedic waiting list who had been waiting for their surgery the longest, based on clinical prioritisation. This would involve a team made up of both Manx Care and Synaptik colleagues, with activity beginning in the new financial year. A larger restoration and recovery business case is under development in order to complete the recovery programmes within Orthopaedics and Ophthalmology, and will also address other specialties with lengthy waiting lists such as ENT.



Theatre Improvement: Phase One of the Theatre Improvement Programme was completed, with the delivery of seven rapid improvement projects aimed at improving productivity and ensuring safety of the Operating Theatre department. This activity included an initial audit by the Association for Perioperative Practice (APP) utilising the 'Five Steps for Safer Surgery' framework, and resulted in the delivery of targeted action plans. Further project planning is now being progressed in order to build on the initial activity in anticipation of seeking formal accreditation during 2022, whilst future focus will be on further improving productivity through the development of a continuous improvement culture.

Women's, Children's and Families Services: Maternity Services across the UK are undergoing a transformation in line with the recommendations outlined in the Ockenden report – an independent review into the provision of midwifery services – and Manx Care is investing a significant amount of resource and focus on this too, alongside work to integrate all of the sexual health services provided on the Island under one management team. Ultimately this will allow the delivery of more joined-up, integrated care to people who require support. Manx Care's Maternity, Neonatal Unit and Health Visiting Service teams also received accreditation from Unicef (BFI Level One) for their hard work to promote infant feeding across the Island.

Mental Health Recovery College: In late 2021/22, plans were being made for the launch of the Isle of Man's first 'Recovery College', a concept being developed by Manx Care as an integral part of recovery-focused, integrated mental health service provision. Recovery College Isle of Man (RCM) will offer a range of courses and learning experiences focused on helping individuals to develop new skills that will support their recovery from mental health and wellbeing challenges they may face, co-produced with people who have lived experience of having overcome mental health challenges and professional experts. RCM will help its students learn self-management strategies that they can confidently apply to their everyday lives, allowing them to build a life that they find satisfying, meaningful and valuable. It will launch in early 2022/23 as an initial pilot, with a full launch planned in Autumn 2022.

In addition to the developments listed above, a number of commitments were made within the Required Outcomes Framework, for which a significant amount of activity was undertaken during the year led by the Transformation Programme that has laid the foundations for further service developments across 2022/23. A summary is outlined as follows:

- The Primary Care at Scale (PCAS) project has made significant progress during 2021/22, but progress slowed towards the end of the financial year due to complications in relation to data sharing agreements. We remain committed to the development of this work, and progress to date has included the recruitment of various roles to work within GP practices, including First Contact Practitioners, Primary Care Pharmacists and Counsellors. The Target Operating Model across all Primary Care modalities (i.e. Optometrists, Dentists and GPs) has been drafted, followed by proposals around Leadership Development and Population Health Management.
- Much work has also been undertaken on assessing the opportunities that exist for improving same-day emergency care through the continued development of our Ambulatory Emergency Care model. This aims to create additional capacity so that when deemed clinically appropriate patients can be diagnosed and/or treated within a designated area, avoiding the need for a hospital admission. Existing pathways of care are often reported as being fragmented, and having an appropriately resourced facility to streamline patient care will provide an alternative to inpatient care, resulting in the release of capacity for other patients as well as delivering improved convenience and quality of care. A comprehensive assessment of options has been completed and a business case produced, approval of which is due to be sought.



- Significant progress has been made with the Cancer Tumour Site pathway reviews, which have seen a revised deployment approach agreed to reflect the scale of the task in hand. Workshops and 121s with key stakeholders have been held across all 12 tumour sites, and the first group of business cases (covering Dermatology, Upper GI and Lower GI) have been developed. These are currently progressing through the review and approval process ahead of implementation. The remaining three groups will be progressed during the first half of 2022.



6. twelve months in review

Manx Care began life in an unprecedented situation – in another lockdown period due to Covid-19, with a large number of Covid-positive patients in Noble’s who required round-the-clock care, and with a significant amount of our workforce off sick themselves or having to look after their families at home. Given that the Island’s health and social care sector has continued to be impacted by the virus since then, Manx Care’s achievements against our three strategic priorities during our first year of operation is truly remarkable, and testament to the resilience and determination of our people.

To recap, our three strategic priorities as outlined in Manx Care’s Required Outcomes Framework are:

1. To improve patient quality and safety
2. To improve our financial health
3. To create a positive working culture

Although by no means an exhaustive list, this section outlines some highlights from our first 12 months, alongside a summary of three of Manx Care’s strategic programmes.

Developing the Manx Care Advice and Liaison Service (MCALS)

At Manx Care’s Board meeting on 25 May 2021, its CEO committed to the launch of the Manx Care Advice and Liaison Service (MCALS) for a six-month trial period, with a view to this becoming a substantive service if demand for this could be proved. The trial commenced on 02 August 2021, with MCALS going on to become a substantive service.

MCALS is based on the functions of the well-established notion of a ‘Patient and Liaison Service’ (PALS) which is commonplace in NHS Trusts across the UK. It is committed to listening to, learning from, and responding to people who use Manx Care’s services, as well as partners and stakeholders – all of whom have a vested interest in improving the delivery and performance of health and statutory social care services across the Isle of Man. It strives to be accessible to all minority groups, community groups, hard-to-reach groups and voluntary sector organisations, and works to support people in a number of ways, including but not limited to:

- Signposting to the wide range of services/functions which are the responsibility of Manx Care, including liaison across our tertiary care settings
- Listening to and acting on queries and concerns
- Provision of information and advice about Manx Care’s services
- Searching efficiently for solutions to problems and difficulties encountered
- Providing support and advice on how to make a formal complaint, if all other avenues to resolve an issue have been exhausted
- Ensuring feedback, comments, concerns and compliments are listened to and used to improve Manx Care’s existing and future services

A key objective for Manx Care is to improve safety and experience of those utilising its services, and to respond effectively to members of the public and those who represent the public. MCALS has supported this objective, with 87% of queries received during its first calendar year being resolved on the same day.

87% of queries received by MCALS during its first calendar year were resolved on the same day



The role that MCALS plays with members of the public

Analysis of the enquiries dealt with by MCALS during its trial period highlight that the type of interactions it manages on a daily basis are highly varied in terms of subject matter and level of complexity. Resolution of service user concerns often requires MCALS officers to take on a number of different, problem-solving roles, including:

- Messenger
- Go-between
- Supporter
- Mediator
- Resource Mobiliser

Three further roles have been identified as being intrinsic to problem-solving:

- Information provider
- Listener
- Facilitator

How MCALS is supporting Manx Care in the delivery of its corporate objectives

MCALS wholeheartedly supports the achievement of Manx Care's strategic objectives, particularly the improvement of patient safety through the provision of high quality care. Through weekly trend analysis and reporting, it aims to drive positive change and innovation in Manx Care's services, quickly identifying any areas of concern and taking steps to support any small changes or enhancements that are needed. In addition, it captures positive feedback and shares this with colleagues and teams who've made a difference to a patient, service user or member of the community. It will enable Manx Care to capture, consolidate and utilise patient and service user feedback to shape the design and delivery of future integrated service provision, leading to better outcomes for patients, safer services and improved patient experience.

Meet the MCALS Team



Karen Maddox
MCALS Service Lead



Cat Simpson
Patient Experience Officer



Sandra Keene
MCALS Officer



Rachael Douglas
MCALS Officer



Development of Manx Care's Wellbeing Partnerships



The Wellbeing Partnerships

Northern Wellbeing Centre
Dalmeny House, Cumberland Road
Ramsey IM8 3RH
t: 01624 686432
e: northernwellbeingpartnership@gov.im

Western Wellbeing Centre
Derby Road
Peel IM5 1HP
t: 01624 685846
e: westernwellbeingpartnership@gov.im

Southern Wellbeing Centre
Thie Rosien, Station Road
Port Erin IM9 6BP
t: 01624 686109
e: southernwellbeingpartnership@gov.im

Statutory and community-based organisations working together to deliver the right care, in the right place, at the right time.



The Wellbeing Partnerships are becoming more talked about across the Island, and rightly so. Essentially these are locations that will become a hub for the provision of integrated community care in the four corners of the Island – care that's delivered as close to an individual's home as possible. They are a partnership between Manx Care, organisations in the third sector and Government departments. The Western Wellbeing Centre celebrated its first year of operation in September 2021, public consultations to shape the development of the Northern Wellbeing Partnership began in November 2021 across the Northern communities, and the Southern Wellbeing Partnership was officially opened by the Island's Minister for Health and Social Care, Lawrie Hooper MHK in December 2021. Plans are being developed for the launch of an Eastern Wellbeing Partnership, and Manx Care would encourage members of the public to input into consultation events when these are advertised given that public feedback is incredibly important in shaping services that work for local residents.

The Western Wellbeing Partnership is the most developed service, and is an exemplar of how integrated community care can be delivered as close to a person's home as possible. In Peel, alongside the day centre for the people of the West of the Island, multiple clinics are delivered there – both by Manx Care practitioners and from other agencies. This prevents people from having to travel to Noble's for routine appointments that they can attend in a more convenient location for them.

The Hubs operate on a single point of referral principle. People living in any of the Island communities can make a referral on behalf of themselves or someone they may be worried about by speaking to one of the Referral Co-Ordinators in confidence. The Partnership Teams meet weekly to discuss the referrals they have and make sure that people are getting appropriate, integrated care that's as close to their homes as possible.

The Western Wellbeing Partnership

The Western Wellbeing Hub is co-located with the Western Laa Menagh Day Centre opposite the large Shoprite store in Peel, providing a social space for the community to use. This site has been very well received by residents in the West, and is very well utilised by a broad range of Manx Care's practitioners, as well as groups from the third sector and Isle of Man Government.

Consultation and treatment rooms are used for services and clinics including:

- Podiatry
- Diabetes
- District Nursing
- Community Mental Health Service, individual counselling sessions, Older People's Mental Health Service
- Social Work team
- Early Health Service (children and families) and Midwifery
- Hear2Hear drop-in clinic
- Quit4You
- QEII School (out of school support sessions during term time)
- Benefits drop-in clinic
- Debt advice drop-in clinic
- Probation Service
- Housing Matters
- Hospice
- Stroke Society



Hot-desking and refreshment facilities are available for practitioners, and those hosting clinics and drop-in sessions from the third sector and Government, with weekly practitioner meetings and quarterly development meetings diarised to ensure the service continues to meet the demand of residents living in the West of the Island.

The Southern Wellbeing Partnership

Based in Thie Rosien in Port Erin, the Southern service supports people living in the catchment areas of the Ballasalla, Castletown and Southern GP surgeries, and is becoming a well-used facility with practitioners working across Manx Care's services, as well as those from the third sector. Its bookable meeting and event space is popular in the community, with weekly practitioner meetings and monthly development meetings taking place to ensure services are developed in line with the needs of the Southern population.

The Northern Wellbeing Partnership

A counter service is operating from Dalmeny House on Cumberland Road in Ramsey whilst the physical office space is in the process of being developed. However, weekly practitioner meetings are taking place and drop-in sessions can be arranged if required. Virtual clinics are established, and home visits are being undertaken by the team. A monthly development meeting is also taking place, as well as the Northern Community meeting which is held at Ramsey Town Hall. The team continue to host public engagement sessions across the Island's northern communities in order to support the development of this facility.

Meet the Wellbeing Partnership Team



Adrian Tomkinson
Wellbeing Partnerships
Group Manager



Claire Bader
Western Wellbeing
Partnership Lead



Gary Lord
Northern Wellbeing
Partnership Lead



Joanne Kneen
Southern Wellbeing
Partnership Lead



Julie Lister
Wellbeing Partnerships Group
Support Officer



Hilary Yates
Referral Coordinator,
Western Wellbeing Partnership



Caroline Jagger
Referral Coordinator,
Northern Wellbeing Partnership



Wiki Bartlett
Referral Coordinator,
Southern Wellbeing Partnership



Developing the Island's Covid-19 vaccination programme

By the time Manx Care launched on 01 April 2021, the Covid-19 vaccination programme had been operating for three months, from a bespoke hub created in Chester Street in Douglas town centre and from a pop-up clinic established at Isle of Man Airport in Ronaldsway. This was deemed to be the best use of space for the Airport at the time, given that the Island remained in lockdown.

Delivery of the Island's Covid vaccination programme has fallen in line with the advice being delivered from the Joint Committee on Vaccination and Immunisation (JCVI), with different cohorts prioritised in terms of age and clinical vulnerability initially, before different cohorts were prioritised for the delivery of third doses and booster doses. Colleagues from across Manx Care supported the vaccination effort through the year, many being redeployed from their substantive roles to deliver as many 'jabs in arms' as possible.

During Manx Care's first year of operation, it:

- Delivered over 138,000 Covid vaccinations in total
- Celebrated the 100,000th Covid jab delivered on the Island with local resident, James Redmond – his jab was delivered by former Paramedic, Peter Smith
- Managed delivery of the Booster programme alongside the Annual Flu programme, meaning uptake of the flu vaccination was higher than in previous years
- Established new vaccination venues in the North (Ramsey Cottage Hospital), South (Castletown Civic Centre) and West (Western Wellbeing Hub)
- Worked with GPs in order for Covid vaccinations to be delivered at surgeries in the South, East and West, giving residents more choice on where to have their jab
- Delivered over 2,400 vaccine in one day in response to the increased risk of the Omicron variant (December 2021)

A personal highlight for the team during the first year of Manx Care happened in the two weeks before Christmas 2021, when colleagues from across Manx Care joined them to deliver 14,772 vaccinations in response to the emerging treat of the Omicron variant. This was a huge undertaking, and many people gave up their spare time – including planned family occasions – to ensure so many members of the population were able to receive their booster jab in a timely manner.



The Vaccination Team pictured at the Chester Street Hub, December 2021

(picture credit courtesy of Dave Kneale, Isle of Man Newspapers)



a month-by-month review of key successes

April 2021

The impact of Covid-19 tore through our services across the early part of 2021 – so much so that at one point, Manx Care had to reach out to the Cheshire and Merseyside Critical Care Network to provide support for the Critical Care Unit at Noble’s Hospital. Critical Care staff from the North West flew to the Island to support their counterparts here when Manx Care was struggling with the availability of colleagues to meet the rapidly growing demand for our services. One thing that’s really become apparent over the course of the 2021/22 financial year is the strength of our relationships with various networks in the UK, and how these continue to drive some of the positive changes taking place as Manx Care continues to improve services for our patients.

May

Manx Care is undergoing a significant period of transformation to change the way that health and statutory social care services are delivered on the Island, which will ultimately achieve the true integration of health and social care. Primary Care is one area which will experience the greatest change. In time, Manx residents will see more of the services they need being delivered through their GP Surgery or in a Community Care setting rather than in a hospital setting.

One such service is Dermatology. In May 2021, five GPs began a bespoke training programme in this clinical specialism, resulting in them being able to treat patients for a wide range of skin conditions they would have previously been referred to hospital for. This will result in faster access to treatment and a reduction in waiting lists, as well as care delivered closer to home. In May, Manx Care also integrated its Primary Care and Community Care services together under one singular leadership structure.





June

June was the month in which the 100,000th Covid vaccination was delivered on the Isle of Man. This was a momentous day, and testament to the incredible effort from colleagues working across Manx Care's services to get as many members of the population vaccinated as possible. The Covid-19 vaccination programme has been a standout success across the year under review, with many individuals deserving credit for stepping out of their day jobs to support this.



The team who delivered 180 second doses to adults with learning disabilities at the bespoke Vaccination Hub created at the Tall Trees Resource Centre



*James Redmond received the 100,000th vaccination delivered on the Island from Paramedic, Peter Smith
(picture credit courtesy of Cabinet Office Communications Team, Isle of Man Government)*



In June, Manx Care also went to town embracing Pride, showing our support for the event and our wider commitment to equality and inclusion.



Kiarail Vannin





July

In July, Diagnostic services were struggling to meet the two-week wait standard for urgent referrals for people with suspected breast cancer. Given the importance of being able to offer people the opportunity to be seen by Specialist within two weeks, Manx Care established a partnership with Spire Hospital on the Wirral in order to increase capacity whilst it looked to address long-standing recruitment challenges and the impact of Covid on on-Island diagnostic capacity. This partnership and other interventions quickly brought Manx Care back within the two-week standard.

This partnership heralded the start of a broader programme to transform the delivery of cancer services on the Island, address recruitment gaps, invest in services, and work to develop partnerships with tertiary care providers so that Manx residents receive the same level of treatment on-Island as they would receive in the North West. Manx Care has established the 'Clatterbridge @ Noble's' model of care so that it is aligned with the pioneering treatment that is delivered at the world-renowned cancer centre, and CEO, Teresa Cope, was invited to join the Cheshire and Merseyside Cancer Alliance partnership board.

Furthermore, we have established bi-annual Cancer Performance Days for all of the individuals involved in the treatment of people diagnosed with cancer on the Island to help shape the future of our care pathways, and we're working hard to strengthen our partnerships with the third sector on-Island and those charities who support people with a cancer diagnosis.

We have also increased our resilience in the provision of both diagnostic and cancer services on-Island through a significant recruitment programme, and are proud of the level of care and diagnostic capability that can be provided on-Island.





It was a momentous day for Maternity Services on the Island on 12 July 2021 as the team welcomed Bonnie Papper – the first baby to be born in the new Noble’s Hospital – back to celebrate her 18th birthday with them. It was fantastic for the team to be able to take time out of their day to do this and reflect on how maternity services have changed so much in that time.



Maternity Services across the UK are currently undergoing a transformation in line with the recommendations outlined in the Ockenden report, an independent review into the provision of midwifery services. Accordingly, Manx Care is investing a significant amount of focus and resource here too, alongside work to integrate all of the Island’s sexual health services under one management team. Ultimately this will allow them to deliver more integrated care to people who require this support.



Locally, the Maternity Services team have invested a lot of time and effort into the level of personal support they are able to provide to parents and their families. In July, they launched the Rainbow Care service for pregnant ladies who have previously lost their baby, whereby they receive extra support throughout subsequent pregnancies. This team continues to support a number of Island-wide activities to help people remember babies who were born sleeping.

Recruitment across health and care services is a global issue, and in the UK, it is estimated that there is a shortage of around 50,000 Nurses and 10,000 Doctors. Manx Care continues to be impacted by historic and long-standing recruitment issues, but is equally

focused on addressing this in part by increasing on-Island training opportunities and developing home-grown talent. In the year we welcome our first Student Midwife, Jess Roberts (left), on placement with us. Manx-born Jess is a student at Salford University but is able to study part of her course at home, with the intention that she will return to a job here when she graduates.



In July, we also celebrated the first 100 days of Manx Care.

August



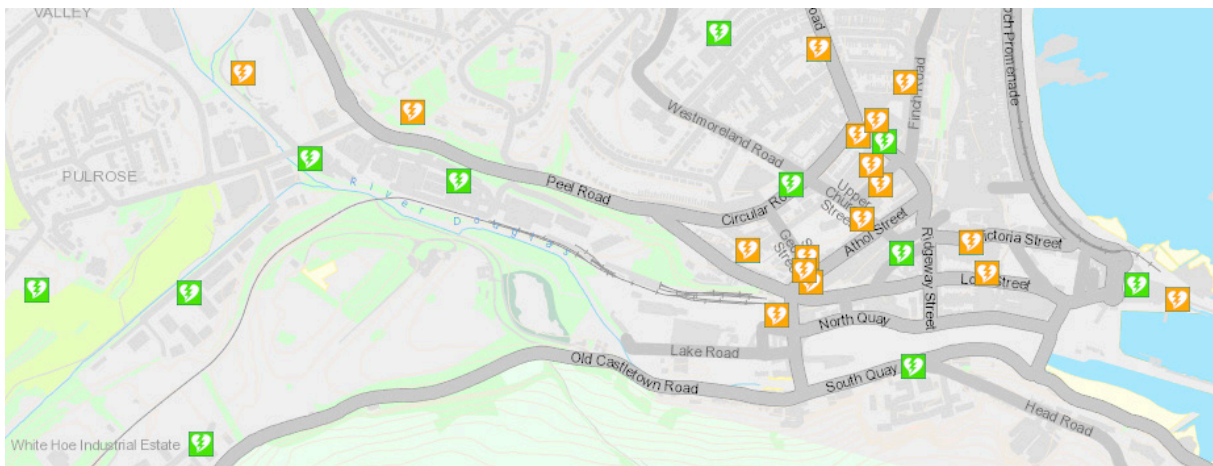
August saw the launch of MCALS – the Manx Care Advice and Liaison Service – giving members of the public a direct helpline spanning both health and social care services for the first time. This is comprehensively referenced elsewhere within this Annual Report.



September

September was the month where Manx Care really began to lay the foundations for its programme to reduce waiting lists, which have only been exacerbated by Covid-19. This piece of work is called the 'Restoration and Recovery of Elective Activity' programme, and is being delivered in NHS Trusts across the UK as well as here on the Isle of Man. Essentially, Trusts are looking to private healthcare providers to work alongside them to help reduce their waiting lists, and supplement the capacity they have to offer appointments and operations themselves. Manx Care secured £1.86m of Treasury funding to support the initial phases of this work, which began to deliver significant progress in February 2022.

In September, Isle of Man Ambulance Service launched a website called Defibs.im – this allows anyone who has a defibrillator on the Island to register its location on the site so that these can be used in the event of an emergency – and potentially save someone's life. This project was led by Dave Scambler, a Senior Paramedic, in collaboration with colleagues in Government Technology Services, and has to date proven incredibly popular.



Finally, we saw a first in the Isle of Man, with two Advanced Nurse Practitioners (ANPs) becoming Partners in a GP surgery for the first time, with Mary-Rose Pritchard and Janette Qualtrough joining Dr. Steffen Osbelt at Snaefell Surgery in Douglas. Although this is a recognised GP partnership model in the UK given the evolution of the Primary Care model there, until now the Isle of Man has followed a traditional GP Partner model.





October

In October, Manx Care celebrated the landmark 40th anniversary of the Cummal Moar residential home in Ramsey. Cummal Moar really is an institution in the town, having supported so many members of the community and their families over the last four decades. The residents planned and got together for a Ruby-themed lunch which they were delighted with, especially after the Covid lockdowns and the impact this has had on their social events.



Early in 2022, plans were submitted to redevelop a piece of land on Waterloo Road in Ramsey into a new site for Cummal Moar, working with the local housing authority and the local Commissioners. If approved, this will allow Manx Care to provide purpose-built en-suite residential accommodation for elderly people for years to come, helping them to retain their independence and creating a wonderful home in the North.





Manx Care also began advertising for applicants to join the two Nurse training programmes it delivers here on the Island at Keyll Darree, our purpose-built training facility based on the Noble's Hospital site. As already highlighted, Nurse recruitment is incredibly challenging, and Manx Care continues to carry a large number of historic Nursing vacancies, heavily impacting service delivery. Increasing the number of training places for people on-Island is something Manx Care is looking at, and would like to achieve. However, this isn't solely a decision that can be made by us, and requires input and support from multiple other agencies. The quality of on-Island Nurse training is demonstrated by the fact that a recent Mental Health Nurse graduate and current colleague, Isobel Jagus, was named 'Student of the Year' at the annual University College Isle of Man graduation ceremony in October 2021.



Manx Care has formed a strategic partnership with a specialist recruitment agency, GTEC, to address and reduce Nursing staff shortages. In the year under review, we welcomed six new colleagues from countries including India, Nigeria, Ghana, Malawi and Lesotho to the Island, with more due to join in the second financial year. We will continue to welcome new colleagues through this partnership, as well as continue to invest in our people and develop future training opportunities for all colleagues.

November

Our people were recognised for their continual efforts in going above and beyond for their profession both on the Isle of Man, and professionally by their industry colleagues. Our Professional Development Team, at the time led by David Neilan, Nicola Howard and Kelly Gold, were shortlisted at The Nursing Times Awards for 'Preceptorship Programme of the Year', a programme they have developed on-Island to support newly qualified Nurses and Midwives during their first year 'on the job', ensuring they have access to development and mentoring opportunities that will help them to flourish in their careers with Manx Care.



In addition, Manx Care colleagues won the 'Public Sector Achievement of the Year' Award at the Isle of Man Awards for Excellence for the role they played in the Island's response to the Covid-19 pandemic in 2020.



In November, we launched the first of the public consultations for the development of the Northern Wellbeing Partnership.



December

In December, Noble's became one of the first hospitals in the world to become pager-free thanks to the implementation of Smartpage Clinical. This is a first-of-type smartphone-based emergency alert system that eliminates the need for pagers and improves response times to urgent calls. It gives colleagues the ability to use two-way instant messaging and better communication to enable rapid clinical decision-making and faster patient care. Manx Care's Chief Technical Information Officer, Dr. Gregor Peden, worked with Alcidion – an external technology solutions provider – on the development of this. It is just one way in which Manx Care has invested in the development of its digital capability across the last year, which it will continue to do.



During the 12 days before Christmas, Manx Care developed a social media campaign called 'The Twelve Days of Manx Care Christmas', essentially shining a spotlight on the large and diverse number of teams and colleagues working across the organisation, and to recognise their hard work. Colleagues and teams put themselves forward for this – and they were overwhelmed with the level of public affection shown towards them.



Blood Clinic Team, Noble's



Western and Southern Wellbeing Partnership Teams



Pathology Team



*Northern District Nurse Team,
Dalmeny House, Ramsey*



Endoscopy Unit, Noble's Team



Southern Group Practice Clinical Team



Pathology Team, Noble's



Outpatient Nursing Team in Surgical Clinics



Ward 2 Team, Noble's



Skin Service Team at Ramsey Cottage Hospital



Children's Community Nursing Team



Audiology Service Team



MIU Nurse Practitioners Malcolm Dyche and Vince Roberts, Ramsey Cottage Hospital



ICU Team, Noble's



Grandstand Swabbing Team



Air Ambulance Team



Noble's Pharmacy Team



Keyll Darree Library Team



Harbour Suite Team, Manannan Court



Hailwood Medical Practice Team



January 2022

January 2022 saw Manx Care celebrate a phenomenal achievement with Noble's Hospital finishing first – ahead of 170 NHS trusts across the UK – in a survey by the General Medical Council designed to report on the quality of medical education amongst IMT1 (Internal Medical Trainees working their first year as a junior Doctor). Junior Doctors come to the Isle of Man for the first year of their three-year training programme – and it was their feedback that led to this. Manx Care invests a significant amount of time in them as individuals, and we were delighted that they recognised and appreciated this.



In January, Manx Care also began to experience the impact of a significant increase in community transmission of Covid-19, which subsequently impacted services and led to a large rise in colleague sickness and absence. We launched our 'Mask Up' campaign as Manx Care began to re-introduce measures across every service to protect the most vulnerable people in our care.



February

In February, Manx Care began to see substantial progress in the 'Restoration and Recovery of elective activity' programme. By the end of the month, the Endoscopy waiting list backlog had been cleared thanks to a substantial amount of work invested by the in-house team, using surplus theatre capacity across weekend periods. Around 450 people had their procedures in that time. Over the following weeks, around 150 cataract operations and 350 pre-assessment appointments were delivered through Manx Care's partnership with Synaptik, we began to offer some patients the choice of having their assessment virtually using a specialist working for a company called Medefer, and we began planning for the delivery of some orthopaedic activity too. Delivery of this began early in the second financial year.



The Integrated Mental Health Services Care Group announced a working partnership with Island-based mental health charity Minds Matter to deliver psychological therapies for children, young people and adults awaiting treatment. This is a fantastic way of not only working with a local charity and the Island's third sector – something Sir Jonathan Michael identified as key in his independent review into the future provision of health and social care on the Isle of Man – but in supporting a number of young people who had been waiting for specialist support to help them deal with some challenges to their mental health and wellbeing.



General Manager of Integrated Mental Health Services, Ross Bailey, with Andrea Chambers, CEO of Minds Matter

March

Another of the key recommendations of Sir Jonathan Michael's independent review was to establish a 24/7 emergency air bridge in order that people who are critically ill or injured can be transported to a specialist Trauma Centre in the UK as quickly as possible. In March, Manx Care launched a six-month trial with GNAAS – the Great North Air Ambulance Service – to operate a helicopter emergency service and create an emergency air bridge to support our local community.

We also delivered the last of our public engagement sessions on Long Covid, ME and Chronic Fatigue Syndrome in order for this feedback to be used to shape the development of on-Island support services, and began to make real progress in the development of an Island-wide Palliative and End of Life care pathway in collaboration with Hospice. Both of these will be key deliveries during Manx Care's second year of operation.

At the end of the year under review, Manx Care analysed the performance of its Pathology Team, which found itself frequently in the spotlight due to the role it played in Covid-19 testing on the Island, and the incredible number of Covid test results it reported in that time. On-Island testing capability is significant, with the team delivering a staggering number of other test results which have been a crucial part of our patients' diagnostic journeys. The team performs more than 500 different types of tests in the Lab at Noble's, reporting more than two million individual test results in the year under review. It is important to highlight the extent of the services that the team provides, and how much the work from teams like Pathology underpins the care being delivered across the organisation.





Engaging with colleagues, patients and service users

Giving colleagues and patients a voice

In order to better understand the reality faced by our patients and our colleagues, Manx Care's Board invites both groups to share their experiences of our organisation, whether that be receiving treatment or working across our services. Feedback is then used to shape the organisation and drive positive change across the services it provides, for the ultimate benefit of other patients and service users, and current and future employees.

Staff stories are shared at the bi-monthly People Committee, which is a Board committee led by a Non-Executive Director; patient stories are shared monthly in private at Manx Care's Board meetings. This is complementary to feedback which is captured from both groups using multiple other mechanisms.

Patient Stories

Patients are invited to attend a monthly Board meeting in order to tell their story, or alternatively, they may share this anonymously either through a written account they have produced, through a piece they have pre-recorded, or through an account which is presented by a member of the team who's been involved in their care. The Board isn't interested in hearing just about the positive experiences, instead wanting to hear about when there's room for improvement in the services and experiences we provide across both health and social care.

Across the 2021/22 financial year, the Board has heard about a range of patient experiences including from someone actively receiving treatment at Clatterbridge Cancer Centre in Liverpool, someone who was flown to Liverpool for heart surgery before beginning a lengthy recuperation on the Island – a journey touching many of our services, the diagnosis and subsequent treatment journey between Alder Hey Hospital in Liverpool and Noble's Hospital of a child with a tumour, and the provision of respite care on the Island.

Patient stories are heard by the Board in private in order to protect the confidentiality of individuals and their families.

Staff Stories

In the same way that patients are invited to share their experiences in person or anonymously, our colleagues are invited to do the same at the bi-monthly People Committee, with their feedback used to shape the culture of Manx Care. We have invited a number of our colleagues working across our services to share their stories with you as part of our Annual Report:



Nicola Burgess
*Nurse Endoscopist,
Noble's Hospital*

In November 2021, Nicola Burgess became Manx Care's first locally-trained Nurse Endoscopist.

Nicola has achieved her qualification after years of study and more than ten years of work-based experience at Noble's Hospital, following many years of experience gained in the NHS in the UK. She attended the National Nurse Endoscopy Course at St Thomas's Hospital, London, and had to gain the Independent Prescriber qualification and Advanced Life Support qualification to fulfil the requirements necessary to qualify as Nurse Endoscopist.

Nicola became an Endoscopy Nurse 'by accident' in her own words, having accepted an opportunity to work in this specialism following time spent as a Surgical Urology Nurse. The passion for Endoscopy as a speciality developed rapidly and next year is her twentieth anniversary of starting work in Endoscopy in the UK. She is committed to delivering exceptional patient-focused, evidence-based care and continuing to support the development of the Endoscopy services on the Island, and has become a member of the British Society of Gastroenterology.

Nicola commented: "I'm delighted to become the Island's first Nurse Endoscopist after years of studying, and actually turning my passion into a reality! It means that we have increased specialist capacity here on the Island, and can continue to develop our Endoscopy provision for people living on the Isle of Man. It's been very challenging managing my day-job alongside family commitments and studying, but my passion for Endoscopy has really helped me to focus on this."

Nurse Endoscopist trainees are expected to attend the same JAG (Joint Accreditation Group) courses as their medical colleagues working in this field. Following a period of supervised practice it is then necessary to be assessed by two independent examiners observing real-time procedures in order to gain certification in delivering these. Now qualified, Nicola is currently working through five waiting lists and two admission lists per week, including patients on urgent and two-week pathways.

Nicola is incredibly grateful for the opportunity and support that she has had from Manx Care with regard to the training, funding, travel support and other resources that she has been provided with, and the mentorship she has received from her senior Consultant and Endoscopy colleagues, especially her training supervisors, Mr. Glen Husada and Mr. Abdul Khan, alongside the Endoscopy Manager, Mary Walmsley. Indeed, she claims it 'would not have been possible' without their support! She hopes to be able to pay this back in some small way by supporting the development of future Nurse Endoscopists, as well as the wider service.



Sydney Clark
Community Health Nurse – 0-19
Public Health Nursing Service

I moved to the Island in August 2020 (from South Wales) as a newly qualified Adult Nurse. I started working as a Community Nurse with the Peel District Nursing Team in the September.

As a newly qualified Nurse, I was enrolled onto the preceptorship programme run at Keyll Daree. All newly qualified Nurses and Midwives were offered this and it was a great course to be a part of. We met once a month for a year, and the sessions involved talks from specialist nurses, clinical training/competencies and group supervision.

My favourite part was group supervision as we could all talk about work and our experiences in a safe space. Even though the others had different backgrounds, we all shared similar experiences and challenges that we could learn from.

I enjoyed my time as a Community Nurse in Peel. There was a great sense of community there and I loved visiting the patients in their own homes. I am very enthusiastic about Primary Care and the thought that I was contributing in helping to keep people out of acute, hospital settings was very rewarding. The team of Nurses I worked with were very welcoming and supportive. I was assigned a preceptor, as part of the preceptorship programme, whom I met with frequently and worked through my Band 5 competencies with.

After a year as a Community Nurse, I started working as a Community Health Nurse in the 0-19 Public Health Nursing Service (Health Visitors and School Nurses). I was unaware that I could work in the service as an Adult Nurse but found out that you can as any form of registered Nurse/Midwife. I work closely with Health Visitors, School Nurses and Community Nursery Nurses to provide a universal and targeted service for children and young people on the Island.

In the last couple of weeks, I've been accepted onto the Specialist Community Public Health Nursing (SCPHN) Masters course with the University of Chester, run through Keyll Daree. This is an amazing opportunity to progress and is fully funded by Manx Care. It gives you the opportunity to branch off as a qualified District Nurse, Health Visitor or School Nurse. I have chosen to take the School Nursing path as I am very passionate about providing public health and safeguarding care to school aged children. I start in September and will finish in August 2023.

I would say to anyone thinking of working for Manx Care that it is a supportive environment that gives you lots of training opportunities to develop your career. Manx Care offer a generous relocation package and preceptorship bundle for new colleagues.



Will Bellamy
*Head of Isle of Man
Ambulance Service*

I started in post in January 2022, following my move to the Island from Kent, England. I started my career within the Ambulance Service straight from leaving school, joining Surrey Ambulance Service in 2004 to work in the Patient Transport Service (PTS) prior to going onto St George's Medical School to complete my degree in Paramedic Science. Whilst undertaking my studies, I worked in the Control Room taking 999, urgent and routine calls in our Banstead Control Centre. In 2008, I moved to Kent working as a dual role Control Room Duty Manager and Paramedic, working six weeks in each of the different settings.

In 2012, I was privileged to be seconded to the London Olympics and Paralympics as a Paramedic. Most recently I have worked in leadership positions in a variety of backgrounds from front-line Operations, within the project team setting up the NHS 111

Service, leading the merger of our Control Rooms and implementing a new computer aided dispatch system, to most recently leading the team across North Kent during the Covid-19 pandemic.

It is an absolute privilege to lead the team here in Isle of Man Ambulance Service. I have a committed and enthusiastic team who are passionate about the role they play within our Island community. Since starting here, I have been on a journey of discovery and learning about the service. My initial reflections are of the challenges we face, about how we manage the continuous activity growth, how we deal with our staffing concerns, how we can create training opportunities for Paramedics on-Island and how we can manage our demand in a more efficient way than our current process.

I have had a steep learning curve with regard to getting to know and prepare the team for the Isle of Man TT and Manx Grand Prix. It was my first one this year. I really enjoyed it and found it an amazing experience to be a part of.

Moving to the Island has inevitably presented some challenges for me. However, I have colleagues with similar stories to tell and experiences to share who have always been helpful in providing advice and guidance. One thing about people here on the Island is that they are more than willing to help – or they know someone who can!

For me, coming from the NHS to the Isle of Man has given me the ability to have a better work-life balance. Being on the beach on my paddleboard within 15 minutes of finishing work is priceless.



Dr. Ian Duffus
GP Partner, Southern Group Practice and former Emergency Department doctor

I moved to the Island in 2017 from London with my wife after completing my foundation training. My wife grew up on the Isle of Man, so we already had close ties here and felt that moving here would present us with a unique opportunity to develop our professional lives and have a better quality of life outside of work. We live close to the beach and make the most of living on this glorious Island with our two young children; we feel so safe here. We initially only came to the Isle of Man for a year, but enjoyed Island life so much, that year turned into four and now we have decided to stay.

When we first moved to the Isle of Man I was working in the Emergency Department (ED) at Noble's as a hospital doctor. However, I heard about the on-Island GP trainee programme and decided this was something I really wanted to pursue.

I found my time working in Noble's ED thoroughly engaging. In the UK, most hospitals have a 'specialism' and patients can be sent to hospitals outside of their local area for specialist treatment. The Island does do this to some extent, but because Noble's is the only ED for the whole population, it has to cover all manner of services – you literally have to deal with everything that walks through the door, so the spectrum of injuries that colleagues see and treat in the hospital is unlike anything else I have experienced. The TT, for example, has given me exposure to a variety of trauma injuries that I don't think I would have seen in my career if I hadn't have been here. In the UK, serious injuries would be taken to their closest trauma centre, but we manage everything here.

When the opportunity to train as GP came up, I applied and this was supported by Manx Care. I was very grateful for the development opportunity, and the fact that there are many professional development opportunities available to you. The level of support and mentorship from my senior colleagues was incredible; the amount of time they afforded me and the continued opportunities to develop my skillset have been invaluable. The training on the Island is flexible and has more of a 'community' feel, which is what you want from your GP. Throughout my training I continued to work some shifts in Noble's ED, which again really helped me to develop my clinical skills all-round.

My wife, who is also a GP, has taken professional development opportunities too since we moved here. She is currently training to be a Dermatology specialist for her GP practice. This is done through the Skin Clinic at Ramsey Cottage Hospital, and supported by Manx Care's Consultant Plastic Surgeon who's also the Clinical Director for Cancer Services.

I have recently completed my GP training and have just started working as a GP Partner at the Southern Group Practice in Port Erin. It is down to the support and training opportunities offered by Manx Care that I now have a fantastic balance between my work life and personal life. I have built up really good working relationships with my Manx Care colleagues in the hospital, and the wider organisation, which is really beneficial when you're working in Primary Care because you already have that network of people you know in Secondary Care, and can reach out to for advice.

I would say to anyone thinking of joining Manx Care – do it! There is so much scope for development and the training routes, in my experience, have been flexible and so worthwhile.



7. creating a positive working culture

Year One deliverables

Manx Care has been supported in the delivery of this objective by the Workforce and Culture team, a team which is aligned to the Health and Care Transformation programme in Cabinet Office. By year-end, a number of tangible changes has been delivered following an essential fact-finding stage, which set out to understand and document a baseline assessment for Manx Care in terms of its structure, processes, people and culture. This activity informed and shaped the approach to the priorities and engagement with Manx Care staff, and through this activity the project team has developed some excellent relationships with colleagues in Manx Care.

It's important to highlight that Manx Care recognises that establishing a positive and inclusive working culture cannot, and will not, be achieved in 12 months. Instead, this is something which requires continued hard work and focus across all levels of the organisation.

Deliverables from Year One include:

- Designing and implementing a bespoke Manx Care **Induction Programme**, with each session delivered personally by Manx Care's CEO
- Improving **Leadership Visibility**, through the design and facilitation of a number of colleague engagement activities with members of the Executive Team and Board. Plans are currently being developed to support additional initiatives that will further enhance the visibility of all leaders across the organisation
- **Cultural reviews and assessments** being undertaken across a number of teams, with detailed themed actions plans created, the delivery of which will continue to be supported by the project team. Further cultural assessments are scheduled and planned for delivery during Year Two
- Analysing data from Isle of Man Government's '**Have Your Say**' surveys and consolidating this into a report, together with recommendations for consideration. This survey data provides an important baseline, together with the local surveys which were undertaken as part of the cultural assessment work
- Completing analysis on available **sickness absence** data. This will be used to inform strategies for reducing sickness absence rates in the future. It must be acknowledged that the three waves of Covid-19 during 2020/21 and into 2022 are having an impact on this activity
- Reviewing the current provision of **wellbeing opportunities** by Isle of Man Government – a cohort of Manx Care colleagues are actively involved in wellbeing focus groups to progress suggestions that will improve the availability of opportunities and help to promote what is already available
- Designing and implementing a **Team of the Month Award** – a recognition scheme aligned to Manx Care's CARE Values
- Facilitating a number of **Values workshops** and away days for teams across a number of Care Groups, and supporting the rollout of the **Manx Care Leadership in Practice (MCLIP) Academy**.



As Manx Care moves towards its second year of operation, preparatory work has been undertaken with regard to establishing two key components that will support the ongoing programme of cultural transformation, including:

- Change Coaches: A number of individuals who have supported colleague engagement initiatives across the year will become 'Change Coaches' for the organisation in order to influence change and sustain the transformational activity over a longer term.
- Workforce Planning: A revised methodology and approach have been agreed, but a number of factors have stalled the progress of this. However, this remains one of the key deliverables within the Year Two plan.

CARE Values

A review of Manx Care's CARE Values was undertaken during the course of the year, with engagement from colleagues across the organisation, in order to ensure that these remained fit for purpose and reflective of the cultural transformation activity taking place. The Values have subsequently been refreshed to ensure alignment with Manx Care's strategic objectives, and are due to be re-launched in summer 2022. This will include a new framework with tools to help embed the Values in the everyday lived experience of the workforce, and will be supported by dedicated resource.

The CARE Values are:



Committed & Passionate

Accountable & Reflective

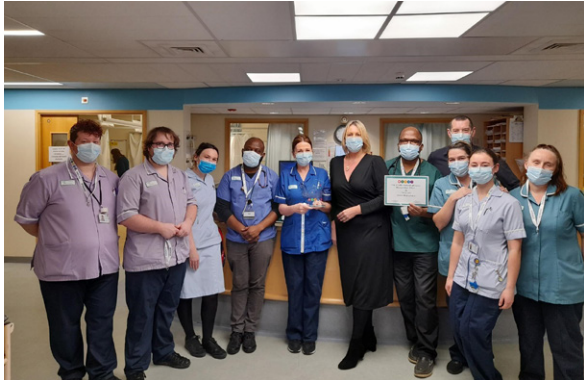
Respectful & Inclusive

Excellent & Innovative

Based on Isle of Man Government's People Qualities, these have been developed to help ensure that Manx Care is a place that colleagues enjoy working in, and that patients and service users are receiving the best possible support.

The framework is there to support positive personal development for every individual within the Organisation, and is based on four CARE Values which are of equal importance.

The CARE Values framework helps to set expectations, standards and types of behaviour for all colleagues, and supports positive personal development, effective leadership and positive interactions.



*CARE Award Winners, November 2021
– Acute Medical Unit, Noble's*



*CARE Award Winners, December 2021
– Endocrinology, Diabetes and Metabolism Team*



*CARE Award Winners, January 2022
– Endoscopy Team*



*CARE Award Winners, February 2022
– The Reablement Team*



CARE Award Winners, March 2022 – The Housekeeping Team



8. improving financial health

The final year-end position for 2021/22 is a £9.9m deficit, summarised below:

FINANCIAL SUMMARY - 31 MARCH 2022

	YTD £'000			
	Actual	Budget	Var (£)	Var (%)
TOTAL - OPERATIONAL	276,870	271,764	(5,106)	(2%)
Income	(14,581)	(14,464)	118	1%
Employee Costs	169,804	169,700	(104)	(0%)
Other Costs	121,647	116,528	(5,120)	(4%)
CIP	(1,700)	(2,700)	(1,000)	(37%)
SV REQUEST	3,893	0	(3,893)	-
Pay Award (above 1%)	3,670	0	(3,670)	-
High Cost Patient (IFR)	223	0	(223)	-
GRAND TOTAL	279,062	269,064	(9,997)	(4%)

Supplementary vote funding of £10m to cover this deficit was approved by Tynwald.

Manx Care faced significant cost pressures during the year, many of which were largely outside of its control. The organisation began the year with its £4.5m contingency fund entirely allocated against inherited funding pressures which left little scope to deal with business as usual pressures, including the rising cost of drugs, high agency spend driven by high vacancy rates, and pay awards above the 1% that was initially budgeted for (3% for HMD (Health, Medical and Dental) and 4% for MPTC (Manx Pay Terms and Conditions)).

During the year, improved financial governance and control mechanisms were put in place across the organisation to allow for improved accountability, better forecasting and earlier visibility of potential issues which will allow time for appropriate mitigation.

Cost improvement delivery fell short of the target of £2.7m, delivering £1.7m. Whilst this is disappointing, it reflects the fact that the programme was not fully agreed until June 2021 and so only represents a partial year of activity. However, significant progress has been made in-year to establish the strong governance and oversight mechanisms referred to above, and lay the foundation for strong performance in 2022/23. Many of the issues faced in 2021/22 around data and staff absence have delayed delivery rather than creating a shortfall in the overall delivery, and approximately £1m in savings has already been secured for 2022/23.

The development of the modelling behind the Growth Business Case submitted to Treasury for the 2022/23 financial year has provided a clear formula (3% + CPI less CIP) to apply when planning future funding requirements for Health and Social Care. This is the first step towards developing a sustainable financial plan. The next is to accurately establish what the current service provision 'should' cost. Work is underway with the Cabinet Office Health and Care Transformation Programme Team to develop this further. Manx Care continues to work towards a multi-year funding model that will allow even greater security and flexibility regarding spending and finances.

The outlook for 2022/23 remains challenging as Manx Care continues to invest in core functions and faces inflationary and other cost pressures. However, the organisation remains committed to achieving financial balance during the next financial year and beyond.



9. mandate objectives – performance summary

Within the Mandate for 2021/22, the DHSC outlined its strategic objectives for Manx Care and associated, specific deliverables (where relevant) for the first year of operation. Progress against the delivery of these is summarised as follows:

Objective	RAG Rating
Contribution towards the Island's response to the COVID-19 pandemic as directed by DHSC. This includes but is not limited to the ongoing delivery of the COVID-19 testing and vaccination programme in accordance with the strategy set by the Department and Government	Green
Demonstrate that the experience of service users, patients and carers is effectively captured, matches the agreed standards and that feedback is used to drive continuous improvement and better outcomes for people accessing and using all services.	Amber
Demonstrate changes in transforming an integrated health and care service delivery following international standards for quality and outcomes.	Green
Ensure that all aspects of health and care have balanced equity of decision making, accountability and provision.	Amber
Demonstrate, embed and lead an effective and robust corporate, clinical & care governance structure across all services for the effective management of risk, the ability to provide real time intelligence about performance, and promotion of a safe, learning and improvement focused culture.	Amber
Demonstrate continued financial balance through delivery of agreed cost and service improvement plans (CIP) and the delivery of the agreed sustainable financial plans.	Red
Waiting times for Mandated Services to be reduced to levels comparable with other developed health and care systems.	Green
Adopt and embed a principle of continuous improvement in design, development and delivery of social care and health care services to ensure high quality measured outcomes are achieved, including, where appropriate, new opportunities to innovate including through the use of new technology.	Amber



Objective	RAG Rating
Effective and collaborative partnership working within the integrated care system	Amber
Developing and integrating Primary Care at Scale as an essential part of service delivery within Manx Care.	Amber
Demonstrate a continuous improvement in workforce engagement, personal and professional development.	Amber
The Isle of Man Government now has a commitment to reach net zero greenhouse gas emissions by 2050, and the Climate Change Bill due to come into operation in 2021 gives every public body a statutory duty to play an active role in achieving that goal.	Red

DHSC RAG Rating Definition

Rating	Criteria
Green	Objective was met
Green / Amber	Evidence that the objective was mostly achieved, and that appropriate plans and actions were put in place where it was not possible to meet the objective.
Amber / Red	Appropriate actions and plans were put in place but the objective remains at risk.
Red	The objective was not met and actions and adequate plans or mitigations were or will not be sufficient to meet the objective.



manx care

Kiarail Vannin