

**Blackpool, Wyre & Fylde
Community Health Services NHS Trust
& Blackpool Victoria Hospital NHS Trust**



**Annual Report & Summary of Accounts
2001/2002**

Mission Statements

Community Health Services NHS Trust

"Blackpool, Wyre and Fylde Community Health Services NHS Trust is dedicated to being the preferred provider of community health care, providing local care for local people"

Blackpool Victoria Hospital NHS Trust

"To Provide The Highest Quality Of Care To Our Patients In The Most Cost Effective Way".

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Review of the Year by the Chairman

The year 2001/2002 was a very difficult year for both the Community and Acute Trusts because of the reconfiguration which took place on 1st April 2002 and there were many, many, difficult issues to resolve.

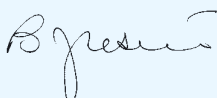
I would like to congratulate the management and staff of both Trusts for all their hard work in continuing to deliver high quality and cost effective services whilst managing considerable change. There is no doubt that all those working for the Community Trust were very sad to see the end of this particular organisation.

I have no doubt that the joint management of the two Trusts was successful and of great assistance to everyone in the management of change and I would particularly like to thank the Executive Directors for their tremendous hard work during the year.

We cannot under estimate the achievements made by the Trusts during the year, for example, the successful commissioning of three Elderly Rehabilitation Units at Bispham, Rossall and Wesham, the completion of the Phase V Development at Victoria Hospital and the award of three star status for the Victoria Hospital Trust.

I concur with the Acting Chief Executive's opinion that this was a truly exceptional year.

Beverly Lester
Chairman



Review of the Year by the Acting Chief Executive

In "normal" circumstances the achievements of the Blackpool Wyre and Fylde Community Health Services NHS Trust and the Blackpool Victoria Hospital NHS Trust over 2001/2002 could be seen as a solid and enduring testimony to the dedication and skills of staff in both organisations. In this unusual year of change and reorganisation these achievements became more than expected; they were, in the end, exceptional.

The Trusts maintained their separate identities throughout the year with two separate Trust Boards but moved towards the new organisational structures with joint senior managers sitting on both Boards and a single Chief Executive overseeing them.

Whilst continuing to provide the highest standards of service and care, the Trusts not only developed the new services and service improvements set out later in this document but also achieved challenging targets for reducing patients' waiting times and for increasing the number of patient treatments offered.

During the year the world changed around the Trusts with:

- New Primary Care Groups being formed locally in Blackpool, Fylde, Preston, and Wyre to commission their services.
- New Strategic Health Authority for Cumbria and Lancashire being formed.
- A new Directorate for Health and Social Care (North) being formed.
- The abolition of the North West Regional Office of the NHS Executive.
- A change to a single Chief Executive across both Trusts.
- The introduction of a Patient Advice and Liaison Service (PALS).

Meanwhile the Trusts prepared themselves for radical organisational change to timescales that allowed no room for practice runs or for pilot exercises. New structures were planned, documented, and consulted upon right up to the point at which they had to be implemented. The foundations were laid for:

- the successful start of a new Hospitals Trust for the whole Blackpool Fylde and Wyre area,
- a new Mental Health Services Trust covering the whole of Lancashire and
- the move of important services to the four new Primary Care Trusts in Blackpool, Fylde, Wyre, and Preston.

In this difficult environment the Trusts also managed to maintain financial stability, both bringing in very small underspends on very large budgets.

The layout of this report reflects the unusual year. The mixture of separate and joint reporting throughout this document satisfies requirements for individual accountability of two separate corporate organisations but also shows how closely the two have worked together over the year to pave the way for change.

I hope that you find the report of interest. I am sure that you see throughout it the fruits of a tremendous commitment and effort from two dedicated and skilled workforces whose aims are to provide the best health services in hospital and in community settings for the populations of Blackpool, Fylde and Wyre.

Tim Evans
Acting Chief Executive



Blackpool, Wyre & Fylde Community Health Services NHS Trust and Blackpool Victoria Hospital NHS Trust

The Trust Structure

Management Arrangements

Following the creation of Primary Care Trusts and Mental Health Trusts, a proposal was submitted to the Secretary of State for Health to dissolve the Blackpool Victoria Hospital NHS Trust and the Blackpool, Wyre & Fylde Community Health Services NHS Trust and establish a new Secondary Care Trust. This proposal was subject to public consultation from 10th December 2001 to 31st January 2002.

From 1st April 2001 to 31st March 2002, a joint management team was established across the Victoria and Community Trusts which enabled the two organisations, whilst maintaining their separate identities, to work closely together. There remained two separate Trust Boards, with the Chief Executive and some of the Executive Directors reporting to each of the Boards.

From 1st April 2002 a completely new Trust was formed which owns and manages all of the Fylde's NHS hospital sites and includes all services whose future was not determined by the new Primary Care Trusts or the Lancashire Care Trust.

Blackpool, Wyre & Fylde Community Health Services NHS Trust

Management Changes

The Chairman and Non-Executive Directors continued in their term of office during 2001/2002.

Declarations of Interest

Miss Beverly Lester – Chairman

Partner of Cooper Law & Lester, Solicitors
Part-Time Chair of Independent Tribunal Service

Mr Jim Armfield OBE – Non-Executive Director Nil.

Mr Tony Shaw – Non-Executive Director

Chair of HOAST Ltd (until Nov 2001)
Director of Fylde Coast Enterprise Agency (until Nov 2001)
Chair of Blackpool Primary Care Trust (from 2/11/01)

Consultant to Blackpool Moneyline
Trustee of Blackpool Ladies Sick Poor Association

Mrs Mary Whyham MBE

Director of Society for Companion Studies Ltd
Assistant Chief Officer,
National Probation Service, Lancs

Mr Jack Croysdill – Non-Executive Director

Director of United Norwest Co-operative Ltd

Mrs Christine Breene – Non-Executive Director

Member of Employment Support Committee
Blackpool, Wyre & Fylde Society for the Blind

Mr David Gill – Chief Executive Nil.

Mrs Wendy Swift (nee Potts) – Deputy Chief Executive Nil.

Dr Ian Stewart – Medical Director Nil.

Mr Graham Duncan –
Acting Director of Finance
(from 1.11.00 to 1.5.01) Nil.

Mrs Val Schofield –
Executive Nurse/Director of Primary Care
(until 30.11.01) Nil.

Mr Mike Swift –
Director of Human Resources
(until 31.12.01) Nil.

Remuneration Committee

Membership of the Remuneration Committee:-

Miss B Lester – Chairman
Mr J Armfield
Mr T Shaw
Mrs M Whyham
Mr J Croysdill
Mr D M Gill
Mr M Swift (by invitation)

Three meetings of the Remuneration Committee took place during 2001/2002.

Audit Committee

The Trust's External Auditors are PricewaterhouseCoopers.

Membership of the Audit Committee:-

Mr T Shaw – Chairman (until 2.11.01)
Mr J Croysdill – Chairman (from 2.11.01)
Mrs C Breene

Three meetings of the Audit Committee took place during 2001/2002.

Risk Management Committee

Membership of the Risk Management Committee:-

Mr D M Gill
Mrs W Swift (nee Potts)
Mr G Duncan
Dr I Stewart
Mrs V Schofield
Mr M Swift

Six meetings of the Risk Management Committee took place during 2001/2002.

Blackpool Victoria Hospital NHS Trust

The Trust Structure

Management Changes

The Chairman and Non-Executive Directors continued in their term of office during 2001/2002. The period of appointment for Mr Fothergill (Chairman) and Mr Andrew Dowds, Mrs Carol Gradwell and Professor Neville Woodhead (Non-Executive Directors) was due to expire on 31st October 2001. However, in view of the proposed reconfiguration of the two local Trusts from 1st April 2002, the appointments were extended until 31st March 2002.

Declarations of Interest

Mr Barry Fothergill – Chairman

Deputy Chairman of Blackpool Grand Theatre Arts and Entertainment, Chairman of Irwell Insurance Co Limited.

Mr Nigel Bradshaw – Non Executive Director (Vice Chairman)

Chairman of W T Aked Holding Ltd.

Mr Michael Carr – Non Executive Director

Member of Blackpool Borough Council (Clifton Ward), Chairman of Development Control (Planning) Committee, Member of Blackpool Council Combined Fire Authority.

Mr Andrew Dowds – Non Executive Director

Director of BNFL Uranium Asset Management Limited, Director of A.W.E. Management Limited, Director of BNFL Enterprises Limited and Director of BNFL Enterprises (Investment Management) Ltd.

Mrs Carol Gradwell – Non Executive Director

Chair and Director of Blackpool, Wyre and Fylde Disability Services Limited, Chair of P.I.P. Pre-School Integration Programme, School Governor of St John Vianney Early Years Development and Child Care Partnership, Chair of Fylde Coast Disability Forum.

Professor Neville Woodhead – Non Executive Director

Director of WRL Limited (Housing Trust).

Mr David Gill – Chief Executive Nil.

Mr Tim Evans – Director of Finance Nil.

Dr Peter Hayes – Medical Director

Private Practice at Fylde Coast Hospital.

Mrs Mandie Sunderland –

Director of Nursing and Quality Nil.

Mr Peter Dewdney –

Director of Planning and Information Nil.

Remuneration Committee

The Trust's Remuneration Committee acts in relation to the following matters:-

- to determine and review salaries and benefits in kind of all Executive Directors.
- to recommend the payment of any discretionary bonuses and other incentives.
- to act on behalf of the Trust in any matter or dispute relating to the Contract of Employment of an Executive Director or their Terms.

Membership of the Remuneration Committee:-

- Mr N Bradshaw – Chairman
- Mrs C Gradwell
- Mr A Dowds
- Mr J Lyons – Secretary

Two meetings of the Remuneration Committee took place during 2001/2002.

Audit Committee

The Trust's Audit Committee has the following responsibilities:-

- to note and advise the Board upon the appointment of External Auditors by the Audit Commission, the audit fee and any questions of resignation or dismissal.
- to discuss with the External Auditors, before the audit commences, the nature and scope of the audit and ensure co-ordination where more than one audit firm is involved.
- to review annually, or more often if required, the Standing Orders/Standing Financial Instructions and Budgetary Control and Delegation Arrangements of the Trust, ensuring compliance with all legislation.
- to review the annual financial statements of the Trust before submission to the Trust Board.
- to review the management and expenditure of benevolent funds.
- to discuss problems and reservations arising from the interim and final audits, and any matters the auditors may wish to discuss (in the absence of management where necessary).
- to review the Internal Audit programme, consider the major findings of Internal Audit investigations and management's response, ensure co-ordination between the Internal and External Auditors, and discuss any matters the Auditors may wish to discuss (in the absence of management where necessary).
- to keep under review the effectiveness of internal control systems, and in particular review the External Auditor's management letter and management's response.
- to review annually the effectiveness/value for money of the Audit Committee.

The Trust's External Auditors are KPMG LLP.

Membership of the Audit Committee:-

Mr A Dowds – Chairman
Mr M Carr
Professor N Woodhead
Miss J A Oates – Secretary

Four meetings of the Audit Committee took place during 2001/2002.

Trust Compliance:

Both Trusts complied with national guidance/policies in the following areas; they:

Clinical Governance: Developed and implemented systems and structures to ensure that clinical risks were minimised and sound governance assured.

Disability Discrimination Act: Satisfied the Employment Services Department that the Trusts are committed to considering the employment of disabled people.

Equality Statement: Took action to implement initiatives which improve performance in managing diversity and equality of opportunity. The Trusts have an Equal Opportunity Policy and managers/staff are made aware, through induction and training, of their responsibilities to provide equality of opportunity in the workplace.

Staff Involvement: Involved staff in the planning as well as the delivery of services.

Complaints: The number of complaints received by the Community and Acute Trusts in 2001/2002 was 148 and 551 respectively. During this period, 3,360 appreciation letters were received by the Community Trust and 2,939 tokens of appreciation and 198 thank you letters were received by the Victoria Hospital Trust.

Code of Practice on Openness

Published information is readily available to the public regarding the services offered by the Trust. Such documents include:-

- Annual Report
- Business Plan
- Information Leaflets

Other Specific Requirements for the Trust:-

- Personal Health Records
- Complaints
- Provision of Information
- Charging for Information

Public Meetings

Public Meetings of both the Blackpool, Wyre & Fylde Community Health Services NHS Trust and the Blackpool Victoria Hospital NHS Trust have been held annually since their inception in 1994. Details of the first Public Meeting of the newly established Trust, to discuss the Annual Report and Accounts for 2001/2002, can be obtained from the back of this Report.

Meetings of both Trust Boards have been held in public on a monthly basis throughout the year.

Blackpool, Wyre & Fylde Community Health Services NHS Trust

Major Achievements for 2001/02

Service Expansion

- Additional Dermatology services developed at Sycamore Lodge.

- Development of nurse led services within Dermatology.

- Fast track clinic for suspicious lesions on the skin now includes a skin biopsy same day service, increasing the number of patients who can be seen.

- The Mental Health Helpline was extended to cover Chorley and South Ribble Mental Health Services.

- Increased staffing of the Mental Health Liaison Nurses in the A & E Department to extend cover to support people who are in crisis.

- Within the Continence Service, additional nurse staffing and part time clerical support were provided to meet increased service demand and bring about improvements in cure rates.

- Increased health visiting support provided for three GP practices.

New Developments

- Introduction of booked appointments system within Dermatology for out-patient appointments.

- Introduction of a new role for nurses at South Shore Hospital. The "Practice Educator" role to support the learning of international recruits from the Philippines and Spain.

- Implemented new Continence Home Delivery arrangements.



Mental Health Helpline

Quality Initiatives

Walk In Centre



- Successful development and provision of a new NHS Walk-In Centre and Connect Young Peoples Health & Information Centre in Central Blackpool.
- Primary Care staff were offered the opportunity to update their driving skills to reduce risk of accidents.
- Implemented and evaluated the Parenting Initiative for Health Visitors across Blackpool, Wyre and Fylde.
- Implemented recommendations of the District Nursing Weekend Working Review.

Buildings, Accommodation and Facilities

Rossall Rehabilitation Unit



- Successful commissioning of the three 40 bedded Elderly Rehabilitation Hospitals at Bispham, Rossall and Wesham and two 25 place Day Hospitals based at Rossall and Wesham, including the transfer of patients and the redeployment of staff.
- Premises at Whitegate Drive were closed and services were relocated to other sites.
- Over £500,000 was invested at Parkwood and the Psychiatric Out-Patient Department was relocated to the Parkwood Unit from Victoria Hospital Out-Patient Department.

Blackpool Victoria Hospital NHS Trust

Major Achievements for 2001/02

Service Expansion

- Improved access to diagnostic CT and MRI scanning was achieved as a result of extended working days for CT and MRI scanning.
- Additional anaesthetic cover and support for surgical services was provided plus the provision of greater anaesthetic input into the Chronic Pain Service.
- The introduction of a new Training Scheme for the Operating Department Practitioners increased the number of people training, and a Practice Educator was employed to support these new requirements and existing staff development.
- In collaboration with the Diabetic Service, funding was secured to provide insulin pumps and consumables for appropriate children with Diabetes Mellitus.
- The Thrombolysis Service Team was expanded and the aim to meet the National Targets for thrombolysis following acute myocardial infarction was achieved.
- Introduction of 'fast-track' referral processes to ensure that all patients with suspected cancer see a specialist within 2 weeks of GP referral.
- Development of a lymphoedema service including the appointment of a Lymphoedema Nurse Specialist.
- Extension of the Cardiac Rehabilitation Service to include additional patient groups post angioplasty and cardiac surgery.
- Expansion of the Chronic Obstructive Pulmonary Disease (COPD) Service, with the appointment of an additional COPD Nurse.
- Expansion of the Anti-coagulant Dosing and Advisory Service (ADAS) to include additional clinics and a new Domiciliary Service.
- Introduction of new intermediate Ophthalmic Clinics at Whitegate Drive and Fleetwood to speed up appointments for patients with eye disease.
- A Rapid Access Chest Pain Clinic Service was introduced.



The ADAS Team

New Developments

- A Deep Vein Thrombosis (DVT) Nurse Practitioner was appointed based in the Medical Assessment Unit to provide an improved out-patient service, leading to a reduction of admissions to hospital.
- Reduced waiting time for hospital treatment was achieved by the introduction of a maximum of a 15-month wait for in-patient and a 6 month wait for out-patient treatment.
- The Booked Admissions Programme increased the number of out-patient appointments and elective admissions, which were pre-booked. A full Booked Admissions Service was offered within the Gastroenterology Unit for both day patients and in-patients.
- A Midwifery Teenage Pregnancy Co-ordinator (midwife) was appointed to develop services for teenage parents, including communication links with Social Services.
- Introduction of active participation in the Sure Start Initiative.
- The Trust entered into partnership with a local provider of childcare facilities to provide an on-site nursery for all hospital staff. A Childcare Co-ordinator was appointed to help staff to secure childcare provision and to aid the recruitment and retention of staff.

Quality Initiatives

- Infrastructure developments occurred within the Pathology Department leading to improved hospital control of infection arrangements.
- The Chronic Pain Service introduced a multi-disciplinary team (MDT) approach to improve care planning and reduce multiple patient interviews.
- Employed an increase of approximately 10% more registered nurses and midwives compared with the previous year. To aid this recruitment and retention, the Trust provided pro-active overseas recruitment, including recruitment of nurses from Spain and the Philippines, and doctors from Spain, to take up posts in hard to fill specialities. Also, the provision of return to practice courses, a cadet scheme and a development and action learning programme for newly qualified staff and nurses returning to practice.
- Investment was made to improve standards and quality of cleanliness, accommodation and food for all services. Patients views were given greater prominence with the introduction of the new NHS Charter, Patients' Prospectuses, Patient Advice and Liaison Services (PALS) and Patient Forums.
- The Trust pledged to achieve 'Improving Working Lives' and established a steering group in preparation for future assessment.



Intensive Care Unit & Staff

The Trust achieved the National Target to reduce Junior Doctors working hours.

Building, Accommodation and Facilities

- In July 2001 the Phase V development was completed at a cost of approximately £31 million. This replaced outdated temporary medical wards built as emergency accommodation during the Second World War. It consists of 206 medical beds, a new 7 bed Coronary Care Unit, 8 replacement Intensive Therapy beds, and a replacement Accident and Emergency Department, and concluded with the opening of the new Intensive Care Unit in October 2001. The Minister of State for Health, the Right Honourable John Hutton, MP, attended Victoria Hospital on 1st February 2002 and carried out the official opening of the building.



A & E Department & Staff

- Approval was given for a £33 million Cardiac Centre at Blackpool Victoria Hospital. The new unit will be built on land adjacent to the Women's Unit and the project is expected to take 3-4 years to complete. This

new development will include 4 Cardiac Theatres and 4 Catheter Labs; a 20 bed ICU plus approximately 100 other beds; x-ray and out-patient facilities and an Education Centre. This development will provide additional capacity and allow a substantial increase in patient activity by doubling the cardiac work currently undertaken.

- Improved patient services included a programme of improvements for disabled access and a TV, radio and telephone facility.
- A Centralised Waiting List Department was established to help reduce waiting times and cancelled operations.
- The Ophthalmology Day Case Unit was expanded to accommodate additional activity. There was a significant reduction in the waiting time for Day Case Cataract Surgery.

Blackpool, Wyre & Fylde Community Health Services NHS Trust

Finance Report

Overview and Financial Duties

The Blackpool Wyre & Fylde Community Health Services NHS Trust continued in a well-established trend of financial stability and balance. In meeting all financial duties it set a sound base for successor organisations to inherit.

The Trust underspent by £32 thousand in the year, a tiny fraction of the Trust's total budget that represents an almost exact achievement of the statutory requirement to break-even. The Trust's cumulative break-even position since 1997/98 now stands at £895 thousand in surplus. This leaves a sound balance sheet for successor bodies and results from a lot of hard work on financial control over many years, both by the Finance Directorate in the Trust and by managers and clinical/non-clinical staff in their day to day activities.

The Trust also met its financial duty to stay within a net cash limit for the year (known as the "External Financing Limit"). It managed a net cash inflow of £1.2 million, actually recording a small over achievement of £27 thousand.

The Trust achieved a capital resource limit of £3,253 thousand against a target of £3,474 thousand set by the NHS Executive.

Finally, the Trust achieved a capital cost absorption rate of 5.7%, meeting its duty to include in prices a reasonable return on the assets it uses in providing healthcare. The small movement from 6.0% target was within an acceptable range and was due to increases in the capital made available to the Trust after its capital cost forecast was made.

Management Costs

The Trust again reduced its management costs, meeting a target set by the NHS Executive to bring management costs down to 3.63% of income. The establishment of a joint management team at executive level contributed significantly to this reduction. Details of management costs are given on page 13.

Capital Programme

The Trust invested £3.3 million in capital schemes. The main elements in the capital programme were:

Scheme	£000
Parkwood (health and safety issues involving replacement windows and ceilings)	933
Conversion of former National Westminster Bank buildings to a Walk-In Centre	870
Site Works for PFI Units	369
Windmill Mews (conversion of outbuildings and an extension)	298
Other Schemes	783
Total Capital Invested	3,253

Capital resources available to the Community Health Services NHS Trust were increased by successful bids for funds to refurbish the Parkwood Acute Mental Health Unit and to develop the Blackpool Walk-In Centre. These were two very different investments. The first scheme was aimed at improving the quality of existing services with the thorough refurbishment of our acute psychiatric unit to provide a modern and pleasant environment that is also safer for patients. The second scheme was a new approach to offering patients access to Health Care through a "walk-in-centre" set in the bustling centre of Blackpool.

Other major projects were funded from the Trust's unconditional capital allocation. These included final site works around the three new 40 bedded units for the elderly. These units were primarily funded through the Private Finance Initiative, and have modernised the environment for many of our elderly patients.

Better Payments Practice Code

The Trust is required to pay non-NHS Creditors in accordance with the CBI Prompt Payment Code and Government Accounting Rules. Details of compliance with the Code are given on page 14.

The Trust's Performance Since 1 April 1997

Trust cumulative surplus from 1997/98	1997/98 £000	1998/99 £000	1999/00 £000	2000/01 £000	2001/02 £000
Income	59,018	61,681	68,280	69,411	79,478
Surplus (deficit) after interest	502	420	(63)	4	32
Break even position for the year	502	420	(63)	4	32
Break even position cumulatively since 1 April 1997	502	922	859	863	895

Blackpool, Wyre & Fylde Community Health Services NHS Trust

Summary of Accounts 2001/2002

The following information is extracted from the full accounts of the Blackpool, Wyre and Fylde Community Health Services NHS Trust:

Income and Expenditure Account For The Year Ended 31 March 2002

	2001/02 £000's	2000/01 £000's
Income from Activities:		
Continuing Operations	73,624	62,705
Other Operating Income	<u>5,854</u>	<u>6,706</u>
Total Income	79,478	69,411
Operating Expenses:		
Continuing Operations	<u>(76,312)</u>	<u>(66,162)</u>
Operating Surplus (Deficit)		
Continuing Operations	3,166	3,249
Profit (Loss) on Disposal of Fixed Assets	<u>0</u>	<u>0</u>
Surplus (Deficit) Before Interest	3,166	3,249
Interest Receivable	138	250
Interest Payable	<u>0</u>	<u>(15)</u>
Surplus (Deficit) for the Financial Year	3,304	3,484
Public Dividend Capital Dividends Payable	<u>(3,272)</u>	<u>(3,480)</u>
Retained Surplus (Deficit) for the Year	<u>32</u>	<u>4</u>

Balance Sheet As At 31 March 2002

	2001/02		2000/01
	£000's	£000's	£000's
Fixed Assets			
Tangible assets		58,690	61,029
Current Assets			
Stocks and work in progress	77		49
Debtors:			
Amounts falling due:			
After one year	0		244
Within one year	8,628		6,141
Cash at bank and in hand	<u>247</u>		<u>220</u>
		8,952	6,654
Creditors: amounts falling due within one year		<u>(9,645)</u>	<u>(6,896)</u>
Net Current Assets		<u>(693)</u>	<u>(242)</u>
Total Assets Less Current Liabilities		57,997	60,787
Provisions for Liabilities and Charges		<u>(1,010)</u>	<u>(1,909)</u>
Total Assets Employed		<u><u>56,987</u></u>	<u><u>58,878</u></u>
Financed By:			
Public dividend capital		32,444	35,649
Revaluation reserve		20,724	21,152
Donation reserve		184	261
Income and expenditure reserve		<u>3,635</u>	<u>1,816</u>
Total Capital and Reserves		<u><u>56,987</u></u>	<u><u>58,878</u></u>

Signed on behalf of the Board on 24th July 2002.



Tim Evans
Acting Chief Executive



John Barton
Acting Director of Finance

Cash Flow Statement For the Year Ended 31 March 2002

	2001/02	2000/01
£000's	£000's	£000's
Operating Activities		
Net cash inflow from operating activities	7,507	6,090
Returns on Investments and Servicing of Finance:		
Interest received	144	243
Interest paid	<u>(0)</u>	<u>(15)</u>
Net cash (outflow) from returns on investments and servicing of finance	144	228
Capital Expenditure		
Payments to acquire tangible fixed assets	(3,144)	<u>(1,987)</u>
Dividends Paid	<u>(3,272)</u>	<u>(3,480)</u>
Net cash inflow/(outflow) before financing	1,235	851
Public dividend capital received	1,864	0
Government loans repaid – long term	(3,072)	(851)
Capital element of finance leases	<u>0</u>	0
Net cash inflow (outflow) from financing	<u>(1,208)</u>	<u>(851)</u>
(Increase)/decrease in cash and cash equivalents	<u>27</u>	<u>(0)</u>

Statement of Total Recognised Gains and Losses for the Year Ended 31 March 2002

	2001/02	2000/01
£000's	£000's	£000's
Surplus/(deficit) for the financial year before dividend payments	3,304	3,484
Fixed asset impairment losses	0	0
Unrealised surplus/(deficit) on fixed asset revaluations/indexation	1,366	698
Increases in the donation reserve due to receipt of donated assets	0	0
Change in the donation reserve on depreciation or profit/loss on disposal of donated assets	<u>(84)</u>	<u>(103)</u>
Total recognised gains and losses for the financial year	4,586	4,079
Prior period adjustment	<u>0</u>	<u>(610)</u>
Total gains and losses recognised in the financial year	<u>4,586</u>	<u>3,469</u>

Salary and Pension Entitlements of Senior Managers

Name	Title	Age	Salary (bands of £5000)	Other remuneration (bands of £5000)	Golden hello compensation for loss of office	Benefits in kind	Real increase in pension at age 60 (bands of £2500)	Total pension at age 60 as at 31st March 2002 (bands of £5000)
			£000	£000	£000	£000	£000	£000
D M Gill	Chief Executive	46	35-40	0	0	0	2.5-5.0	15-20
W A Swift (nee Potts)	Deputy Chief Executive	45	10-15	0	0	0	0-2.5	20-25
T H Evans	Director of Finance	43	25-30	0	0	0	0-2.5	5-10
M Sunderland	Director of Nursing & Quality	38	10-15	0	0	0	0-2.5	5-10
V Schofield	Director of Nursing & Quality	48	40-45	0	0	2	0-2.5	20-25
I M Stewart	Medical Director	58	15-20	90-95	0	0	2.5-5.0	35-40
M Swift	Director of Human Resources	47	35-40	0	0	2	0-2.5	15-20
B Lester	Chairman	54	15-20	0	0	0	0	0
J Croysdill	Non Executive	67	5-10	0	0	0	0	0
J C Armfield	Non Executive	66	5-10	0	0	0	0	0
C A Breene	Non Executive	58	5-10	0	0	0	0	0
M C Whyham	Non Executive	54	5-10	0	0	0	0	0
R A Shaw	Non Executive	64	0-5	0	0	0	0	0

The salary costs shown represent the costs borne by Blackpool, Wyre and Fylde Community Health Services NHS Trust. The figures shown under 'Real increase in pension at age 60' and 'Total accrued pension at age 60' represent the individual's full entitlement without adjustment for salary costs recharged to or by other Trusts. Benefits in kind represent the provision of leased cars.

Management Costs

	2001/02		2000/01	
	£000's	% of income	£000's	% of income
Management Costs	2,889		2,784	
Relevant Income	79,478	3.63%	69,411	4.01%

Better Payments Practice Code – Measure of Compliance

The NHS Executive requires that Trusts pay their non-NHS trade creditors in accordance with the CBI Prompt Payment Code and Government Accounting Rules. The target is to pay non-NHS Creditors within 30 days of receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed with the supplier. The measure of compliance:

	2001/02		2000/01	
	Number	£(000)	Number	£(000)
Total bills paid	32,921	14,531	29,067	10,139
Total bills paid within target	30,449	13,428	27,736	9,660
Percentage of bills paid within target	92.49%	92.41%	95.42%	95.28%

External Financing

	2001/02 £000's	2000/01 £000's
External financing limit set by the NHS Executive	1,208	829
External financing requirement	(1,235)	(851)
Overshoot/(undershoot)	(27)	(22)

DIRECTORS' STATEMENTS

Statement of the Chief Executive's Responsibilities as the Accountable Officer of the Trust

The Secretary of State has directed that the Chief Executive should be the Accountable Officer to the Trust. The relevant responsibilities of Accountable Officers, including their responsibility for the propriety and regularity of the public finances for which they are answerable, and for the keeping of proper records, are set out in the Accountable Officers' Memorandum issued by the Department of Health. To the best of my knowledge and belief, I have properly discharged the responsibilities set out in my letter of appointment as an accountable officer.

Acting Chief Executive  Date: 24th July 2002

Statement of Directors' Responsibilities in respect of the Accounts

The Directors are required under the National Health Services Act 1977 to prepare accounts for each Financial year. The Secretary of State, with the approval of the Treasury, directs that these accounts give a true and fair view of the state of affairs of the Trust and of the income and expenditure of the Trust for that period. In preparing those accounts, the Directors are required to:

- apply on a consistent basis accounting policies laid down by the Secretary of State with the approval of the Treasury
- make judgements and estimates which are reasonable and prudent
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the accounts.

The Directors confirm they have complied with the above requirements in preparing the accounts. The Directors are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Trust and to enable them to ensure that the accounts comply with requirements outlined in the above mentioned direction of the Secretary of State. They are also responsible for safeguarding the assets of the Trust and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.
By order of the Board

Acting Chief Executive  Date: 24th July 2002

Acting Finance Director  Date: 24th July 2002

STATEMENT OF DIRECTORS' RESPONSIBILITY IN RESPECT OF INTERNAL CONTROL

The Board is accountable for internal control. As Accountable Officer, and Chief Executive Officer of this board, I have responsibility for maintaining a sound system of internal control that supports the achievement of the organisation's objectives, and for reviewing its effectiveness. The system of internal control is designed to manage rather than eliminate the risk of failure to achieve these objectives; it can therefore only provide reasonable and not absolute assurance of effectiveness.

The system of internal control is based on an on-going risk management process designed to identify the principal risks to the achievement of the organisation's objectives; to evaluate the nature and extent of those risks; and to manage them efficiently, effectively and economically. The system of internal control is underpinned by compliance with the requirements of the core Controls Assurance standards:

- Governance
- Financial Management
- Risk Management [Risk Management System standard for 2001/2002]

This organisation ceased to exist on 31st March 2002 and the system of internal control had not been embedded at that time.

The actions taken include:

- The organisation had undertaken a self-assessment exercise against the core Controls Assurance standards set out above. An action plan had been developed and implemented to meet any gaps.
- The organisation had in place arrangements to monitor, as part of its risk identification and management processes, compliance with other key standards, including relevant Controls Assurance standards covering areas of potentially significant organisational risk.
- The identification and management of risks associated with the dissolution of the organisation.

I had also taken steps to ensure that on-going key risks were documented, and this information was made available to the successor organisation.

As Accountable Officer, I also have responsibility for reviewing the effectiveness of the system of internal control. My review of the effectiveness of the system of internal control has taken account of the work of the executive management team within the organisation which has responsibility for the development and maintenance of the internal control framework and of the internal auditors. I have also taken account of comments made by external auditors and other review bodies in their reports.



Signed

Date: 24th July 2002

T H Evans
Acting Chief Executive Officer
(on behalf of the board)

INDEPENDENT AUDITORS' REPORT TO DIRECTORS OF THE BOARD OF BLACKPOOL, WYRE AND FYLDE COMMUNITY HEALTH SERVICES NHS TRUST

We have examined the summary financial statements set out on pages 10 to 14.

Respective Responsibilities of Directors and Auditors

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

Basis of Opinion

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

Opinion

In our opinion the summary financial statements are consistent with the statutory financial statements of the Trust for the year ended 31 March 2002 on which we have issued an unqualified opinion.



Signature: Date: 6th September 2002

PricewaterhouseCoopers:

101 Barbirolli Square
Lower Mosley Street
Manchester M1 3ED

Blackpool Victoria Hospital NHS Trust

Finance Report

Overview and Financial Duties

The Blackpool Victoria Hospital NHS Trust again overcame severe financial pressures throughout the year to meet all financial duties. One of the key factors in achieving balance was the Trust's ability to secure additional income to pay for activity undertaken above contracted and planned levels, the most pressurised area being cardiac activity. This balance set a reasonable base for successor organisations to build on. Staff and managers throughout the Trust have had to work consistently and conscientiously to maintain this financial discipline in the face of particular pressures which have an impact on hospital based services. The scale of one-off funding for surgical activity (cardiac and non-cardiac) gives some cause for concern as this will need to be secured again to maintain and improve on the level of patient activity achieved in 2001/02.

The Trust underspent by £39 thousand in the year, a very small fraction of the Trust's total budget. This represents an almost exact achievement of the statutory requirement to break-even. The Trust's cumulative break-even position since 1997/98 now stands at £106 thousand in surplus. This leaves a sound balance sheet for successor bodies.

The Trust also met its financial duty to stay within a net cash limit for the year (known as the "External Financing Limit"). It managed a net cash outflow of £3.52 million, exactly achieving its target.

Finally, the Trust achieved a capital cost absorption rate of 5.6%, meeting its duty to include in prices a reasonable return on the assets it uses in providing healthcare. The small movement from 6.0% target was within an acceptable range and was due to increases in the capital made available to the Trust after its capital cost forecast was made.

Management Costs

The Trust once again reduced its management costs, meeting a target set by the NHS Executive to bring management costs down to 3.4% of income. The establishment of a joint management team at executive level contributed significantly to this reduction. Pay rises for senior managers in 2001/2002 were kept within a ceiling of 3.7% of the managerial pay bill. The Trust achieved a capital resource limit of £7,558 thousand against a target of £7,562 thousand set by the NHS Executive. Details of management costs are given on page 23.

Capital Programme

The Trust invested £7.6 million in capital schemes. The main elements in the capital programme were:

Scheme	£000
Phase V Schemes:-	
New Medical Wards, A&E Department, Intensive Treatment Unit (ITU)	1,891
Cardiac Centre (preliminary work involving car-park relocation and site work)	1,055
Student Grants Unit (new accommodation)	497
Blood Bank	249
Nuclear Medicine Imaging System	312
A & E X-Ray Rooms	235
Other Medical Equipment	1,151
I.T. Schemes	602
Other Capital Schemes	1,568
Total Capital Invested	7,560

The Trust was able to supplement its unconditional "block" allocation of £2.1 million capital with funding of £5.5 million gained through specific bids for new and continuing capital schemes.

Post completion payments and works on the Phase V scheme amounted to £1.9 million. The new block was commissioned in the year and transformed the Blackpool Victoria Hospital site, replacing major service areas into a modern setting, including many medical wards, the Accident and Emergency Department and the Intensive Treatment Unit.

Preliminary work began on the next major project secured by the Trust, a stand-alone Cardiac Centre that will broadly double the capacity for cardiac services provided by the Trust.

A major additional investment was enabled in Medical Equipment as the Trust received additional modernisation funding of £500 thousand for that specific purpose.

The key themes to capital investment were the modernisation of services provided and the expansion of capacity available to reduce access times.

Better Payments Practice Code

The Trust was able to pay 90% of its invoices within the Government's prompt payment target. No claims were made against the Trust for the late payment of Commercial Debt. Details of compliance of the code are given on page 23.

Separate Businesses of the Trust

The Trust receives income for its core business of providing health care. It also manages a national Student Grants Unit which provides funds and grants for the provision of student education throughout the UK.

Trust income, surplus, and assets by Business Segment in 2001/2002	Health Care £000	Student Grants Unit £000	Total £000
Income	121,653	224,954	346,607
Pre-interest surplus	4,147	3	4,150
Net interest	4,111	0	4,111
Retained surplus	36	3	39
Net assets	74,421	3	74,424

Note: The Student Grants net surplus of £3 thousand is included under Income (total £121,656) in the Income and Expenditure Account.

The Trust's Performance Since 1 April 1997

Trust cumulative surplus from 1997/98	1997/98 £000	1998/99 £000	1999/00 £000	2000/01 £000	2001/02 £000
Income	84,833	128,539	123,675	133,028	121,656
Surplus (deficit) after interest	(284)	(357)	535	55	39
Prior year adjustment	61	52	5	0	0
Break even position for the year	(223)	(305)	540	55	39
Break even position cumulatively since 1 April 1997	(223)	(528)	12	67	106

Blackpool Victoria Hospital NHS Trust

Summary of Accounts 2001/2002

The following information is extracted from the full accounts of the Blackpool Victoria Hospital NHS Trust:

Income and Expenditure Account For The Year Ended 31 March 2002

	2001/02 £000's	2000/01 £000's
Income from Activities:		
Continuing Operations	110,933	97,124
Other Operating Income	<u>10,723</u>	<u>35,904</u>
Total Income	121,656	133,028
Operating Expenses:		
Continuing Operations	<u>(117,501)</u>	<u>(129,334)</u>
Operating Surplus (Deficit)		
Continuing Operations	4,155	3,694
Exceptional Gain:		
on write-out of clinical negligence provisions	9,070	0
Exceptional Loss:		
on write-out of clinical negligence debtors	(9,070)	0
Profit (Loss) on Disposal of Fixed Assets	<u>(5)</u>	<u>4</u>
Surplus (Deficit) Before Interest	4,150	3,698
Interest Receivable	168	180
Interest Payable	<u>(105)</u>	<u>(79)</u>
Surplus (Deficit) for the Financial Year	4,213	3,799
Public Dividend Capital Dividends Payable	<u>(4,174)</u>	<u>(3,744)</u>
Retained Surplus (Deficit) for the Year	<u><u>39</u></u>	<u><u>55</u></u>

Balance Sheet As At 31 March 2002

	2001/02		2000/01
	£000's	£000's	£000's
Fixed Assets			
Tangible assets		88,555	88,376
Current Assets			
Stocks and work in progress	2,016		1,672
Debtors: Amounts falling due:			
After one year	1,364		6,717
Within one year	3,095		3,252
Cash at bank and in hand	<u>80</u>		<u>80</u>
		6,555	11,721
Creditors: amounts falling due within one year		<u>(7,612)</u>	<u>(7,568)</u>
Net Current Assets		<u>(1,057)</u>	<u>4,153</u>
Total Assets Less Current Liabilities		87,498	92,529
Creditors: amounts falling due after more than one year		0	0
Provisions for Liabilities and Charges		<u>(451)</u>	<u>(5,807)</u>
Total Assets Employed		<u>87,047</u>	<u>86,722</u>
Financed By:			
Public dividend capital		79,108	75,583
Revaluation reserve		5,845	9,320
Donation reserve		1,804	1,568
Income and expenditure reserve		290	251
Total Capital and Reserves		<u>87,047</u>	<u>86,722</u>

Signed on behalf of the Board on 24th July 2002.

Tim Evans
Acting Chief Executive



John Barton
Acting Director of Finance



Cash Flow Statement For the Year Ended 31 March 2002

	2001/02		2000/01	
	£000's	£000's	£000's	£000's
Operating Activities				
Net cash inflow from operating activities		8,821		7,264
Returns on Investments and Servicing of Finance:				
Interest received	182			169
Interest paid	<u>(104)</u>			<u>(79)</u>
Net cash (outflow) from returns on Investments and servicing of finance		78		90
Capital Expenditure				
Payments to acquire tangible fixed assets	(8,250)			(13,772)
Receipts from sale of tangible fixed assets	<u>0</u>			<u>18</u>
		(8,250)		(13,754)
Dividends Paid				
Net cash inflow/(outflow) before financing		<u>(4,174)</u>		<u>(3,744)</u>
Public dividend capital received	3,525			10,144
Government loans repaid – long term	0			0
Capital element of finance leases	<u>0</u>			<u>0</u>
Net cash inflow (outflow) from financing		<u>3,525</u>		<u>10,144</u>
(Increase)/decrease in cash and cash equivalents		<u>0</u>		<u>0</u>

Statement of Total Recognised Gains and Losses for the Year Ended 31 March 2002

	2001/02	2000/01
	£000's	£000's
Surplus/(deficit) for the financial year before dividend payments	4,213	3,799
Fixed asset impairment losses	0	0
Unrealised surplus/(deficit) on fixed asset revaluations/indexation	(3,442)	981
Increases in the donation reserve due to receipt of donated assets	515	125
Change in the donation reserve on depreciation or profit/loss on disposal of donated assets	<u>(312)</u>	<u>(308)</u>
Total recognised gains and losses for the financial year	974	4,597
Prior period adjustment	<u>0</u>	<u>(4,650)</u>
Total gains and losses recognised in the financial year	<u>974</u>	<u>(53)</u>

Salary and Pension Entitlements of Senior Managers

Name	Title	Age	Salary bands of £5000	Other Remuneration bands of £5000	Golden hello compensation for loss of an office	Benefits in kind	Real increase in pension at age 60 bands of £2500	Total accrued pension age 60 at 31 2002 bands of £5000
D M Gill	Chief Executive	46	60-65	0	0	2	2.5-5.0	15-20
W Swift (nee Potts)	Deputy Chief Executive	45	45-50	0	0	3	0-2.5	20-25
T H Evans	Director of Finance	43	45-50	0	0	2	0-2.5	5-10
P J Dewdney	Director of Planning Et Information	43	60-65	0	0	4	0-2.5	10-15
M Sunderland	Director of Nursing Et Quality	38	50-55	0	0	2	0-2.5	5-10
P J Hayes	Medical Director	56	25-30	90-95	0	0	2.5-5.0	35-40
J Lyons	Director of Human Resources	57	60-65	0	0	0	0-2.5	20-25
B Fothergill	Chairman	66	20-25	0	0	0	0	0
NE J Bradshaw	Non Executive	63	5-10	0	0	0	0	0
M Carr	Non Executive	63	5-10	0	0	0	0	0
C A Gradwell	Non Executive	44	5-10	0	0	0	0	0
A Dowds	Non Executive	42	5-10	0	0	0	0	0
N Woodhead	Non Executive	49	5-10	0	0	0	0	0

The salary costs shown represent the costs borne by Blackpool Victoria Hospital NHS Trust. The figures shown under 'Real Increase in pension at age 60' and 'Total accrued pension at age 60' represent the individual's full entitlement without adjustment for salary costs recharged to or by other Trusts. Benefits in kind represent the provision of leased cars.

Management Costs

	2001/02		2000/01	
	£000's	% of income	£000's	% of income
Management Costs	4,042		3,893	
Relevant Income	119,229	3.39%	104,566	3.72%

Better Payments Practice Code – Measure of Compliance

The NHS Executive requires that Trusts pay their non-NHS trade creditors in accordance with the CBI Prompt Payment Code and Government Accounting Rules. The target is to pay non-NHS Creditors within 30 days of receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed with the supplier. The measure of compliance:

	2001/02		2000/01	
	Number	£(000)	Number	£(000)
Total bills paid	47,347	64,140	44,869	62,179
Total bills paid within target	42,821	58,367	41,401	59,430
Percentage of bills paid within target	90.44%	91.00%	92.27%	95.58%

External Financing

	2001/02	2000/01
	£000's	£000's
External financing limit set by the NHS Executive	3,525	10,144
External financing requirement	(3,525)	(10,144)
Overshoot/(undershoot)	0	0

DIRECTORS' STATEMENTS

Statement of the Chief Executive's Responsibilities as the Accountable Officer of the Trust

The Secretary of State has directed that the Chief Executive should be the Accountable Officer to the Trust. The relevant responsibilities of Accountable Officers, including their responsibility for the propriety and regularity of the public finances for which they are answerable, and for the keeping of proper records, are set out in the Accountable Officers' Memorandum issued by the Department of Health.

To the best of my knowledge and belief, I have properly discharged the responsibilities set out in my letter of appointment as an accountable officer.



Acting Chief Executive Date: 24th July 2002

Statement of Directors' Responsibilities in respect of the Accounts

The Directors are required under the National Health Services Act 1977 to prepare accounts for each financial year. The Secretary of State, with the approval of the Treasury, directs that these accounts give a true and fair view of the state of affairs of the Trust and of the income and expenditure of the Trust for that period. In preparing those accounts, the Directors are required to:

- apply on a consistent basis accounting policies laid down by the Secretary of State with the approval of the Treasury
- make judgements and estimates which are reasonable and prudent
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the accounts.

The Directors confirm they have complied with the above requirements in preparing the accounts.

The Directors are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Trust and to enable them to ensure that the accounts comply with requirements outlined in the above mentioned direction of the Secretary of State. They are also responsible for safeguarding the assets of the Trust and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

By order of the Board



Acting Chief Executive Date: 24th July 2002



Acting Finance Director Date: 24th July 2002

STATEMENT OF DIRECTORS' RESPONSIBILITY IN RESPECT OF INTERNAL CONTROL

The Board is accountable for internal control. As Accountable Officer, and Chief Executive Officer of this Board, I have responsibility for maintaining a sound system of internal control that supports the achievement of the organisation's objectives, and for reviewing its effectiveness. The system of internal control is designed to manage rather than eliminate the risk of failure to achieve these objectives; it can therefore only provide reasonable and not absolute assurance of effectiveness.

The system of internal control is based on an on-going risk management process designed to identify the principal risks to the achievement of the organisation's objectives; to evaluate the nature and extent of those risks; and to manage them efficiently, effectively and economically. The system of internal control is underpinned by compliance with the requirements of the core Controls Assurance standards:

- Governance
- Financial Management
- Risk Management [Risk Management System standard for 2001/2002]

This organisation ceased to exist on the 31st March 2002 and the system of internal control had not been embedded at that time.

The actions taken included:

- The organisation had undertaken a self-assessment exercise against the core Controls Assurance standards set out above. An action plan had been developed and implemented to meet any gaps.
- The organisation had in place arrangements to monitor, as part of its risk identification and management processes, compliance with other key standards, including relevant Controls Assurance standards covering areas of potentially significant organisational risk.
- The identification and management of risks associated with the dissolution of the organisation.

I had also taken steps to ensure that on-going key risks were documented, and this information was made available to the successor organisation.

As Accountable Officer, I also have responsibility for reviewing the effectiveness of the system of internal control. My review of the effectiveness of the system of internal control has taken account of the work of the executive management team within the organisation which has responsibility for the development and maintenance of the internal control framework and of the internal auditors. I have also taken account of comments made by external auditors and other review bodies in their reports.



Signed Acting Chief Executive Officer

Date: 24th July 2002 (on behalf of the board)

INDEPENDENT AUDITORS' REPORT TO DIRECTORS OF THE BOARD OF BLACKPOOL VICTORIA HOSPITAL NHS TRUST

We have examined the summary financial statements set out on pages 20 to 23.

Respective Responsibilities of Directors and Auditors

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

Basis of Opinion

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

Opinion

In our opinion the summary financial statements are consistent with the statutory financial statements of the Trust for the year ended 31 March 2002 on which we have issued an unqualified opinion.



Signature: _____

Date: 6th August 2002

KPMG LLP

St James Square
Manchester
M2 6DS

Notice of the Trust's Annual Public Meeting

The first Annual Public Meeting of the Blackpool, Fylde & Wyre Hospitals NHS Trust will be held on Wednesday, 25th September, 2002, at 6.00 pm in the Lecture Theatre, Health Professionals Education Centre, Victoria Hospital.

Obtaining the Trust's Full Accounts

A copy of the full set of Accounts for either Blackpool, Wyre & Fylde Community Health Services NHS Trust or Blackpool Victoria Hospital NHS Trust can be obtained by writing to:-

Miss J A Oates
Secretary to the Trust
Blackpool, Fylde & Wyre Hospitals NHS Trust
Trust Headquarters
Blackpool Victoria Hospital
Whinney Heys Road
Blackpool, FY3 8NR

The supply of a full set of Accounts will be subject to an administrative fee of £5.00.



If you have any comments on our Annual Report or would like any further information, please write to:-

Mr Roy Male
Chief Executive
Blackpool, Fylde & Wyre Hospitals NHS Trust
Trust Headquarters
Blackpool Victoria Hospital
Whinney Heys Road
Blackpool
Lancashire FY3 8NR