

# **Our Year**

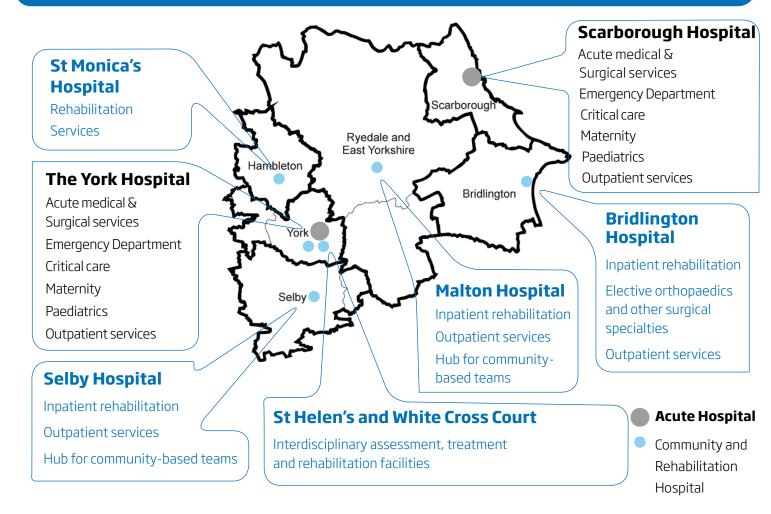


### Annual Review 2016/17

York Teaching Hospital NHS Foundation Trust provides a comprehensive range of specialist acute and community healthcare services for approximately **800,000** people living in York, North and East Yorkshire and Ryedale – an area covering **3,400** square miles.

We manage community-based services in Selby, York, Scarborough, and Ryedale, and deliver a wide range of acute and elective services in our hospitals in Scarborough, York and Bridlington, as well as outpatient services across all of our localities.

Our annual turnover is approaching **£0.5bn**. We manage **nine** hospital sites and have a workforce of **8,500** staff working across our hospitals and in the community.



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Susan Symington Chair

### **Chair's welcome**

Reading this report gives you an important opportunity to gain a real insight into the work of our Trust over the course of the last year. An opportunity to share our delight in some of the highlights of our year, as well as to gain information about the challenges we face.

I thank you for taking time to read this summary of our Annual Report – it is important me and to the board, that all of our staff, our stakeholders and the public feel engaged with the work of our Trust, sharing our successes and understanding our challenges. Reading this report is part of that essential engagement.

For me, the real story about our Trust is people – our patients, service users and our staff. You will see evidence of this throughout this report.

A Trust like ours is entirely dependent on the commitment, skills and willingness of

its staff. This is the vital ingredient for our success. Our patients and service users depend on the skills of our staff to care for them and their families through often difficult times. As well as the important skills of our staff, our patients and service users also look to our staff, in all roles, for kindness and patience and understanding. It's not just about what we do, it's also about the way in which we do things.

We know that the little things really count for our patients. My heart lifts when I meet patients or read letters from service users which describe the kindnesses they have been shown by our staff. Along with our board, I thank all our staff for the small acts of kindness they show every day to those we serve.

Our NHS is barely out of the media: the national challenges which appear on the television, in the newspapers and on the radio, affect us in the same way as they do many other trusts across the  A Trust like ours is entirely dependent on the commitment, skills and willingness of its staff. This is the vital ingredient for our success. Our patients and service users depend on the skills of our staff

country. During the last year we have faced real financial challenges, the winter brought us levels of activity which challenged us all, difficulties in the recruitment of staff at all levels across all of our sites, along with our ongoing efforts to work increasingly seamlessly cross the local health economy, have all put pressure on our Trust and the staff who work in it.

Finding our way through these turbulent times can feel challenging for everyone. One of the ways we seek to navigate a way forward and to be consistent in our approach to caring for our patients and service users- and our staff - is to hold tight to the values of our Trust by keeping them tangibly alive in our words and our actions.

At the heart of the values of this Trust is putting our patients at the centre of everything we do, by caring about what we do, seeking to be helpful, respecting and valuing each other and listening to others in order to improve. During the year gone by I am proud that our staff have continued to ensure that our values remain truly alive.

We can't promise a brighter year ahead: the challenges we faced last year still remain, but so does our resolve and our ambition to tackle them, so do our deeply embedded values and so does our collective commitment to keeping our patients at the heart of everything we do.

I hope that you learn something new as you read this report, that your heart too is lifted by our continued focus on doing the right thing for patients, and that your personal commitment to our remarkable National Health Service is refreshed by what you read.

My thanks go to all of our staff, to our Board of Directors, to our Council of Governors, to our volunteers and to our members. Each one of you has a unique role to play in the success of our Trust.

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Susan Symington Chair

 At the heart of the values of this Trust is putting our patients at the centre of everything we do, by caring about what we do, seeking to be helpful, respecting and valuing each other <sup>99</sup>

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#### Our Year | Welcome

### **Chief Executive's welcome**

This year's annual report and accounts detail our financial and operational performance in the context of increasing pressure on the NHS, in terms of a systematic reduction in the resources available to us, difficulties with recruitment in some areas, growing and changing demand and an increasing expectation regarding both our performance and the quality of service our community requires from us.

The financial pressure facing the provider sector has increased, and we continue to work in one of the most challenged healthcare communities, both nationally and locally, with regard to finance and in particular the funds available to our commissioners to procure and shape services.

"There are clearly several challenges for our local health economy, including an ageing population... "



This has a direct impact on our ambitions, importantly, the ambition of all our staff to provide the best healthcare we can and to see it develop as of course we know it must.

In this context it is hugely important to recognise that we finished the year with a small surplus. Whilst this is a positive outcome for the year given the pressures in the system, it proved insufficient to earn a portion of the national sustainability funding available to us.

We were unable to recover some of the ground we lost in 2015/16, and we therefore enter into the 2017/18 financial year with little flexibility in our financial position, and we will continue to face challenges in terms of our financial performance.

Patrick Crowley

We also continued to have difficulty in achieving some of our performance targets, in particular the four hour emergency care standard, and some specific targets relating to access to cancer targets, largely due to growth in demand. There have been improvements over the past 12 months, and in the year to come we will be focussing our efforts on driving significant and sustainable improvements in acute care as our highest priority.

In late 2015, NHS England released guidance asking for five year 'place based' plans, called Sustainability and Transformation Plans or STPs. We are part of the Humber, Coast and Vale STP, and we are working with partner organisations in clinical commissioning groups, local authorities and other NHS trusts to develop and deliver these plans.

There are clearly several challenges for our local health economy, including an ageing population, pressure on finances (in particular for our commissioners) and a difficult jobs market. The STP process is ultimately designed to ensure local plans for the next five years deliver a sustainable financial future. We are playing our part in developing those plans. Some of the discussions are legitimately Humber Coast and Vale 'STP-wide' however the real changes to delivery will be determined at a more local level.

A key element of our approach has been built on the creation of a Provider Alliance Board in York, and the Ambition for Health programme in Scarborough and Ryedale, both of which have been in existence for some time and have helped us to develop a high level of trust between all health and social care partners.

This trust is vital as we seek to develop improved community care and keep people out of hospital beds or facilitate their discharge more quickly. We have to demonstrate our willingness to listen and understand how other organisations work, and to build relationships around a vision and goals which all can sign up to. Key to the achievement of any of our ambitions is our workforce, and recruiting and retaining the very best staff is of course a priority. We continue to look for innovative approaches to recruiting staff, and during the year we hosted a number of recruitment marketplace events in York and Scarborough, where potential recruits can come and find out more about the organisation and current vacancies, and take part in interviews on the day. This approach has proven to be particularly successful and has become a core element of our recruitment strategy.

I am privileged to work alongside all 8,500 of our staff to deliver the best care possible for the people of North Yorkshire. There are, as ever, many challenges to be addressed, and this is the nature of the services we provide. However, I am confident that the commitment of our staff to doing the very best for our patients, whatever the circumstances means we are well placed to meet these challenges.

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Patrick Crowley Chief Executive

I am privileged to work alongside all 8,500 of our staff to deliver the best care possible for the people of North Yorkshire \*\*

#### Our Year | In the news



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### **Marvellous marketplace**

More than 400 potential employees flocked to the Trust's first ever recruitment marketplace in April, to be greeted by staff who were on hand to share their personal knowledge and experience.

The event was held at York Hospital and was the first of its kind to take place on a hospital site. It was primarily aimed at attracting new nurses but a vast array of information stands also showcased the wide variety of roles available at the Trust. These included adult and children's nursing, community services, physiotherapy, occupational therapy, radiography, admin and clerical posts, portering, catering and nonclinical apprenticeships.

Nichola Greenwood, Nursing Workforce Projects Manager, said: "We were delighted that approximately 400 people attended our recruitment marketplace from all four corners of the county.

"As well as over 30 nurses being successfully interviewed on the day, over 100 people attended to learn about the role of healthcare assistant. Interest was also received for imaging support worker posts, domestic assistants, portering, and volunteering opportunities and around 50 people showed an interest in non-clinical apprenticeships.

"All enquiries received on the day are now being followed up and we look forward to welcoming new starters to the Trust in due course.

"This was the first time we have ever held a

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Recruitment marketplace

recruitment marketplace in the Trust and the atmosphere on the day was incredible. Our staff were amazing, truly demonstrating the Trust values - and a big thank you goes out to all involved."

### Listening to patients and the public

### Patient experience is a key element of quality. Patients tell us that they care about their experience as much as clinical effectiveness and safety.

Patients tell us they want to feel informed, supported and listened to so that they can make meaningful decisions and choices about their care. They want to be treated as individuals and value efficient processes.

We want patients to receive the best possible care and treatment from our Trust, and we are committed to improving the experiences of our patients and their families when they access our services.



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#### Our Year | Listening to patients and the public



In the last year the Trust has made real progress with delivering the five commitments of the Patient Experience Strategy 2015-18. These are:

- 1. LISTENING to our patients, welcoming feedback and sharing the results from ward to board
- 2. RESPONDING to feedback in an open and timely manner and reporting on themes and trends so people can see what matters most to patients, celebrate success and identify what needs improving
- 3. LEARNING from what patients tell us, identifying actions for improvement and monitoring their delivery
- 4. INVOLVING patients in decisions about their care and delivering a service that is responsive to their individual needs
- 5. Nurturing a CULTURE of openness, respect and responsibility.

### **Surveys**

The results of the National Cancer Patient Experience Survey 2015 showed that the Trust's average results for all tumour groups were inside or above the expected percentage range. The satisfaction with 48 questions was inside the expected range and the satisfaction with 11 questions was above the expected range. Out of a maximum score of 10 (patients rated care as excellent), our Trust scored 8.8. The national average score was 8.7.

Analysis of the narrative comments showed that appreciation of staff was the most common theme. The most frequently mentioned concerns were about lack of staff, communications between staff and patients and lack of aftercare. To improve services for the future the following actions are being delivered:

- Implementing an electronic holistic needs assessment. This will be the basis of a care plan that can be shared with the patient and their general practitioner to support communication between hospital and community care.
- Instigating a business case to build a new chemotherapy treatment facility at Scarborough Hospital to improve the environment of care.

Friends and Family Test results show that the Trust maintains consistently high levels of satisfaction; particularly for inpatient, maternity and community services. Satisfaction with the Emergency Department is lower, which narrative feedback shows is substantially linked to the challenges in delivering short waiting times.

	Inpatient		Emergency Department		Maternity		Community	
	Response Rate	% Recommend	Response Rate	% Recommend	Response Rate	% Recommend	% Recommend	
Q1	27.77%	96.47%	14.81%	80.97%	31.82%	99.22%	97.47%	
Q2	25.85%	97.16%	17.46%	84.93%	31.48%	97.06%	94.12%	
QЗ	29.51%	96.79%	15.40%	84.37%	34.27%	98.12%	98.92%	
Q4	27.77%	96.40%	10.43%	84.18%	31.67%	97.09%	98.70%	

### **Complaints and compliments**

	Q1	Q2	QЗ	Q4
York Hospital	62	70	61	69
Scarborough Hospital	27	43	36	33
Bridlington Hospital	2	4	3	3
Community Services	2	6	6	8
TOTAL	93	123	106	113

New complaints received in 2016-17 were:

More emphasis has been put on acknowledging the many compliments that are received by individuals and teams across the Trust. Teams are encouraged to share the numbers received as well as outstanding examples to ensure that excellent practice is identified and celebrated.

#### **Example compliments:**

"I was moved to Maple Ward and the staff were lovely. What has stood out to me, I'm a nurse myself, is your staffs' ability to engage and communicate. One nurse brought me a TV guide from home – this is above and beyond but a sign of engagement with patients."

#### Scarborough Hospital, Maple Ward

"Our 12 year old son slipped and broke his elbow. A horrible and traumatic experience for us all. We arrived in A&E and were triaged and moved to a cubicle promptly. Nurse came in and she was such a sensible, knowledgeable and calming influence that we could just trust we were in good hands. She provide pain medication quickly for our son, spent time talking to us about what was going on, what the X-rays showed and what we could expect. Even though she was busy, every time she went past she came in to ask how we were, got us cups of tea and biscuits and when my son could eat she piled him up with all the goodies she could. She did everything she possibly could to help and calm and provide great care. She is a wonderful nurse and an asset to the NHS." **Emergency Medicine, York Hospital** 



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### **Bridlington Hospital restaurant artwork unveiled**

A stunning series of artwork made entirely from dyed and felted merino wool has been created for Bridlington Hospital.

HAFNEY (Hospital Arts for North East Yorkshire) commissioned Yorkshire textile artist, Kat Wood, to create four pieces of artwork to be displayed in the hospital's restaurant.

To create 'Scenes of Bridlington' Kat took photographs of the landscapes and seascapes at varying times of day to capture the changes in light and colour and

members of staff were also invited to supply their own images, of which four were chosen to be recreated.

Kat explained: "I have thoroughly enjoyed working on this project and I am delighted with the finished pieces. It has been a real team project from the input of staff to holding a workshop with local students from Bridlington School."

Rebekah Walkington, Hospital Secretary



Bridlington restaurant artwork

said: "The artwork has transformed a large blank space in the hospital restaurant, into a vibrant and textured scene of Bridlington.

"It provides a new focal point in the restaurant, helping create a welcoming and engaging atmosphere."

#### Our Year | In the news



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# New maternity bereavement suite for Scarborough

Scarborough Hospital's new maternity bereavement suite, which was made possible thanks to money raised by The Snowdrop Appeal, was completed in May.

The Snowdrop Appeal, which was launched in June 2013, raised over £130,000 thanks to the generosity of local people.

Work began on the project in January, transforming a staff changing area and break room into the new purpose designed suite which will make a difference for those families who sadly lose a baby in pregnancy or shortly after birth.

The spacious suite has its own bathroom and features a bed settee in the lounge area, a television and a coffee machine. The homely furnishings make the room feel less clinical despite being situated off the labour ward. The private space will allow families to be together in a quiet and comfortable environment for as long as they wish.

Rebecca Lord, Capital Projects Manager said: "This has been an incredibly rewarding project to work on. Funded entirely through donations from the local community, the contractors who worked on the project have done so on a not-for-profit basis.

"There has also been a huge amount of patient input. From the colour schemes and fabrics, to the design, were all chosen by parents who had lost a child."

Maya Richardson, Fundraising Officer, said: "I can't express how pleased I am that this appeal



Maternity bereavement suite

has come to fruition and for all of the people who were so generous with their time, money and energy to see the finished suite.

"Local people deserve this facility and so many people have worked hard to make this idea become reality. Much more than just a suite has come from this appeal. People are now talking about what has previously been a taboo subject and the Scarborough area now has a SANDs group for families to go to for further support. People should feel very proud."

### **Elected to represent you**

Every NHS Foundation Trust is required to have a body of elected governors. Our Trust has a Council of Governors, which is responsible for representing the interests of our Foundation Trust members, patients and carers, staff members and partner organisations.

The Council of Governors' roles and responsibilities are outlined in law and detailed in the Trust's constitution.

Its prime role is to represent the local community and other stakeholders in the stewardship of the Trust. They work with the Board of Directors in an advisory capacity, bringing the views of staff and local people forward, and helping to shape the Trust's future.

The Council has a right to be consulted on the Trust's strategies and plans and any matter of significance affecting the Trust or the services it provides.

The Council holds the Board of Directors to account for the performance of the Trust.

### The Council of Governors is specifically responsible for:

- The appointment and removal of the Chair and other non-executive directors
- The approval of the appointment of the Chief Executive
- The appointment and removal of the Trust's external auditors.

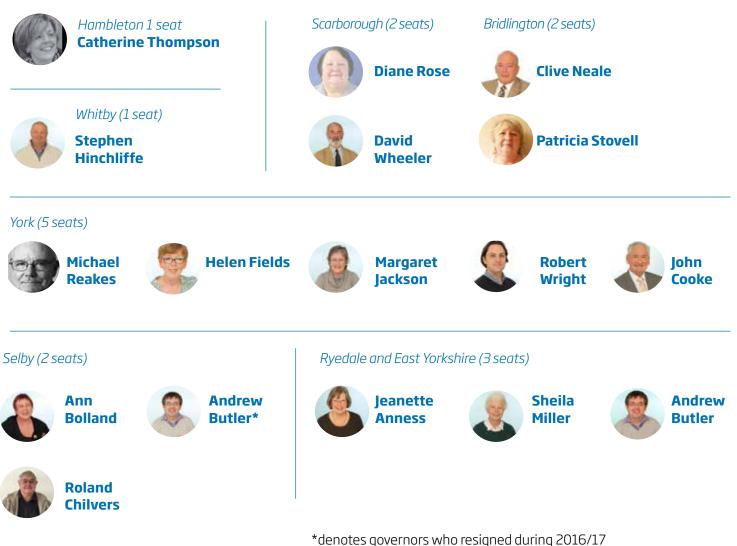
#### Their role also includes:

- Representing the interests and views of local people
- Regularly feeding back information about the Trust, its plans and its performance to the community they represent
- Monitoring performance against the Trust's service development strategy and other targets
- Advising the Board of Directors on their strategic plans
- Making sure the strategic direction of the Trust is consistent with its terms of authorisation as agreed by NHS Improvement (the Foundation Trust regulator)
- Being consulted on any change to the Trust's constitution
- Agreeing the Chair's and non-executive directors' pay
- Providing representatives to serve on specific groups and committees
- Informing NHS Improvement if the Trust is at risk of breaching its terms of authorisation, if the concerns cannot be resolved within the Trust.

### **Our governors**

Our governors represent different constituencies. From 1 April 2015 to 31 March 2016, the Council of Governors comprised the following members.

#### Public governors (elected by Foundation Trust members):



#### Partner Governors (appointed by their organisations):



North Yorkshire County Council (1 seat) **Chris Pearson** 



City of York Council (1 seat) John Galvin\* (not replaced)



The University of York (1 seat) **Rowena Jacobs** (awaiting new appointment)



North Yorkshire and York Forum (1 seat) **Michael Beckett\*** (awaiting new appointment)

#### Staff Governors (elected by staff members of the Foundation Trust)



Scarborough and Bridlington (2 seats) **Helen Noble** 

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**Andrew Bennett** 



Community (1 seat) Sharon Hurst



York (2 seats) **Mick Lee** 



Elizabeth Jackson\*



Emma Sellwood\*

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#### Healthcare organisations (2 seats)



Dawn Clements



Karen Porter

\*denotes governors who resigned during 2016/17

### Lead Governor's report



This has been an increasingly challenging year for the Trust, but as governors we are extremely pleased to note that every opportunity has been made to keep the patient experience at the centre of all the Trust does. recruiting new employees and one of our governors has been supporting nurses from Spain and making their transition into life here in England as easy as possible.

Governors have been actively involved in a number of committees across the organisation, ensuring that the patient voice is represented and taken account of at all times. Governors share their experience and information received at these meetings with their governor colleagues to ensure that everyone is as up to date as possible.

This information is given in writing and supported by verbal reports by the governors from each group/committee. As well as attending Trust meetings, governors have attended local groups within their community such as the patient participation groups at the local surgery/general practice.

By Lead Governor Margaret Jackson

Despite the huge financial pressures the Trust is under, every effort has been made to maintain the standard of care patients receive including ensuring the appropriate staffing levels are in place to support this.

The employment of new staff has been particularly challenging and all opportunities have been taken to recruit staff across all specialties. Governors have been very pleased to be involved in

> 66 Despite the huge financial pressures the Trust is under, every effort has been made to maintain the standard of care patients receive



This has supported the governors in hearing the views of their local community and to share information about any developments or changes within the Trust.

The Governor Forum was set up last year to enable governors to share information and debate issues with their colleagues and highlight topics that they would like to raise with the Trust.

The Foundation Trust Secretary, Chair and Lead Governor discuss issues raised after the forum and decide how best to address the issue and by whom. Governors attend the public Board meeting as observers and have in the last year attended some of the Trust committees chaired by a non-executive director, again as observers. This enables the governors to see how the Non-executive Directors

function and carry out their role. governors have been able to contribute towards the annual appraisal of each non-executive directors and the chair.

This year there has also been a Board to governor meeting and a meeting to discuss the Sustainable Transformation Plan. This enabled governors to have direct discussion with executives, senior managers and non-executive directors about these topics increasing their understanding of the issue and answering any of their questions.

Governors have been pleased to continue to work with the Foundation Trust Secretary to develop the membership, increase the numbers and age range. Support has been given at the recruitment days with governors staffing a

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The Governor Forum was set up last year to enable governors to share information and debate issues with their colleagues and highlight topics that they would like to raise with the Trust 9



### Lead Governor's report continued

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membership stall. These events have been well attended by the local communities and proved to be very successful in recruiting staff and volunteers as well as raising awareness of becoming a member of the Trust and the benefits this brings.

Everyone is encouraged to attend the public part of the monthly Board meeting as an observer to raise their understanding of the Trust, the issues it faces and how these are being addressed. The date, day, time and venue for the Public Board meetings are on the Trust website.

Finally, governors were invited to join everyone at the annual Celebration of Achievement award ceremony and once again were very impressed with all the work being undertaken by individuals and teams of staff across the Trust to ensure best practice was in place and patients received the best possible evidenced-based care. It was a very informative and enjoyable evening.

The Governor award went to 'Project Choice', which is a project to support young people with learning disabilities to gain employment.



66 ...once again were very impressed with all the work being undertaken by individuals and teams of staff across the Trust to ensure best practice





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### **NIPPY machines thanks to League of Friends**

The Scarborough Hospital League of Friends provided funding to buy two new NIPPY Clearway Ventilators for the Respiratory Physiotherapy Team at Scarborough Hospital in July.

The two new NIPPY Clearway Cough Assistor Machines, which cost £7,000 in total, will help the Physiotherapy Team to provide respiratory care for patients on the acute wards and the Intensive Care Unit at Scarborough Hospital.

Ben Richardson, Advanced Clinical Specialist Respiratory Physiotherapist at Scarborough Hospital, explained: "The 'NIPPY Clearway' is a type of ventilator used by Physiotherapists and provides patients with a series of larger breaths in quickly followed by a cough out - this process is called mechanical insufflation-exsufflation.

"Mechanical insufflation-exsufflation machines are a recommended treatment by both the British Thoracic Society and The Association of Chartered Physiotherapists in Respiratory Care in delivering respiratory care for patients that are unable to cough and clear phlegm effectively. Not being able to clear phlegm can result in respiratory distress, pain, increasing levels of fatigue and potentially cause an acute deterioration in a patient's medical condition.

"The type of patients which can benefit from treatment with mechanical insufflation-exsufflation



The new NIPPY machines

are patients with Neurological Diseases such as Motor Neurone Disease, but also more acutely unwell patients whose cough has become weak due to an acutely deteriorating medical condition."

The new ventilators replace the hospital's three old mechanical insufflation-exsufflation devices which had approached the end of their working life.

### **Our membership**

One of the benefits of being a Foundation Trust is that the structure allows us to work more closely with local people and service users to help us better respond to the needs of our communities. People can become involved in this process by becoming a member of the Foundation Trust.

We have seven public constituencies, and governors are elected for each of these by the members. We also have governors who have been elected by staff members, as well as those who have been nominated by various partner organisations. Our governors are listed on pages 16-17.



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### 'Freedom to Speak up Guardian' joins the Trust

#### A new 'Freedom to Speak Up Guardian', Lisa Smith, joined the Trust in September.

This is a new role introduced in all trusts in response to concerns raised following the failings at Mid Staffordshire NHS Foundation Trust. The guardian acts in a genuinely independent capacity to drive forward progress on the reporting of concerns in all elements of care and practice.

Alongside this role, a 'Guardian of Safe Working' was also introduced to protect patients and doctors by making sure doctors aren't working unsafe hours.

The Trust combined these two important roles into one full time post.

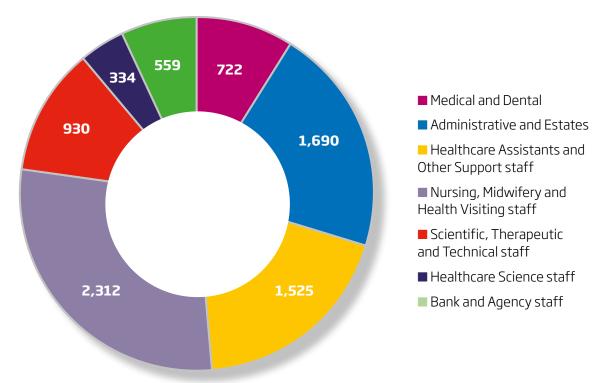
Lisa said: "Speaking up about any concern you have at work is really important, in fact it is vital because it will help us to keep improving our services for patients and the working environment for all our staff."



Lisa Smith

### Our staff

At the 31 March 2017, the Trust had 7,985 permanent employees and 636 staff holding fixed term contracts. **Average number of employees (whole time equivalent basis)** 



#### Being attractive to new staff

In 2016/17 the Trust has taken strides to improve candidates' experience of recruitment into the organisation. It has implemented a new centralised model of recruitment, which has helped to standardise the process of recruitment and selection and allowed us to provide a named contact in HR to every applicant who is made an offer of appointment, while also saving clinical time.

We have invested in a new recruitment management system, which is tried and tested within the NHS to improve hire times, while delivering a more personalised experience to candidates. This has been complemented by increasing our usage of social media, with one Trust post to Facebook last year reaching a passive audience of more than 70,000 people.

During the same period, we have done a great deal to engage directly with potential applicants through a range of different local events, including job and university fairs and school events. The most notable successes, however, were recruitment fairs which took place at York and Scarborough Hospitals, both of which attracted a combined total of approximately 1,000 people and resulted in the Trust making 56 job offers to registered nurses. The Trust also continues to run rolling campaigns for registered and unregistered nursing staff, and has made approximately 500 offers of appointment during the last financial year.

#### Looking after our current workforce and ensuring their health and wellbeing

The Trust's established reputation for supporting staff health and wellbeing has been further enhanced during 2016 as a pilot site for the NHS England Healthy Workforce Programme. Staff are encouraged to take personal responsibility for increasing their physical activity levels and making healthier eating and lifestyle choices in order to maximise productivity and reduce absence (and the associated temporary staffing costs).

Where the Trust does not provide services directly to enable staff to do this, the Staff Benefits Team provides individuals with access to discounted and subsidised services. Particular focus has been placed on support for mental health and musculoskeletal health in 2016, and this will continue in 2017 as these two categories are responsible for approximately 40 percent of all absences. Many staff will remain at work but not performing at their optimum (known as presenteeism) which has an impact on patient experience and the quality of care; so in addition to rehabilitation services the organisation is now also focusing resources on preventative support and educational / self-help interventions.

#### Developing a workforce fit for the future

Across all workforce development projects the focus is on identifying potential for working differently in ways which will enhance efficiency, effectiveness and quality of the services offered, therefore improving the patient's experience. The Trust has trained and subsequently employed 17 qualified advanced nursepractitioners and is continuing to invest in advanced nurse practitioner training with another 11 commencing their training in 2017. They will support service delivery across emergency medicine, acute medicine and community.

In addition, there has been a particular focus on developing our workforce along the East Coast over the past year. A bespoke HNC in health and social care for support staff working in Malton has been developed and delivered in partnership with Coventry University. Further partnership work with Scarborough Sixth Form and Coventry University is ongoing to develop a career pathway for health and social care students using an apprenticeship model. In partnership with the University of York, the Trust has also been successful in a bid to pilot a programme for nursing associates as a 'Fast Follower' site in the national pilot.

#### Our Year | In the news



### Hospital staff take up the baton for good hand hygiene

#### In October, staff promoted good hand hygiene in a novel way when they took part in a torch relay with a difference.

Staff from the Trust took part in the 2016 Hand Hygiene Torch Tour. Organised by the Infection Prevention Society, the tour aimed to highlight the importance of good hand hygiene to both healthcare staff and the public. The torch had been touring the UK since May, with healthcare organisations and NHS trusts across the country, each being designated a 'link day' to hold the torch before passing it on to another health body.

The torch was passed to Anne Tateson, Infection Prevention nurse and lead for hand hygiene at the Trust, on Tuesday 27 September, along with members of the Infection Prevention Team and Nuffield Hospital colleagues. The torch then continued on its way to Harrogate to kick off the infection prevention annual conference.

Anne explained: "The torch relay is a novel way of taking the good hand hygiene message across the country and reinforcing the importance of hygiene for both healthcare staff and members of the public.

"As we start to approach winter, we will start to see more viruses like flu or norovirus, the diarrhoea and vomiting bug, circulating in the community. Both of these viruses can be caught by touching contaminated surfaces and can leave otherwise healthy people feeling very poorly for several days.

"More crucially, if these kinds of virus are caught by people

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Hand hygiene relay

who are already unwell or have low immune systems, like a lot of people in hospital, it can be very dangerous.

"We need to fight infection together so it is vital that visitors help us when they come into our hospitals. Clinical staff in our hospitals are trained in thorough handwashing techniques, but viruses can easily be brought into hospital by visitors. The most common way germs are spread is by people's hands. Effective handwashing with soap and warm water is the single most important thing that anyone can do to help the spread of infections and help themselves and their loved ones."



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### Hospital secures prestigious award

#### The Trust and Kier are celebrating after being announced winners at the 18th annual Building Better Healthcare Awards.

The Building Better Healthcare (BBH) Awards are held each year to celebrate innovation and improvement in the built environment, medical devices and people working in the healthcare industry.

Lilac Ward, at Scarborough Hospital, was named winner in the 'Best example of Efficiencies' category beating off stiff competition from eight other entries.

The award is presented to an individual or team of health and social care estates and facilities managers or private contractors that has demonstrated service improvements and/or changes to working practices that have helped reduce the cost of delivering services. The judges also looked for entries which have measurably reduced costs while at the same time enhanced or preserved services.

Lilac Ward, which opened in 2015, is an exemplar impatient ward of 32 beds on top of an existing 29 bed ward. It was recognised for its design, which incorporates best practice in clinical layout and incorporates twice as many single bedrooms as other wards at Scarborough Hospital.

Andrew Bennett, Head of Capital Projects, York Teaching Hospital NHS Foundation Trust, explained: "Lilac Ward provides our patients with top quality accommodation in a state-of-the-art environment and offers an improved



Building Better Healthcare Awards

experience for patients, visitors and ward staff.

"The design of the ward is intended to maximise not only the visibility of external landscaping to patients but also the visibility of patients to nursing staff.

"The design of the four-bed bays makes efficient use of space while maximising the distance between bed heads, which is an important factor in infection prevention. In addition, the 'nested' design of the single rooms with ensuite facilities makes best use of available space."

### Managing our finances

The table below provides a high level summary of the Trust's financial results for 2016/17.

#### Summary Financial Performance 2016/17

	Plan	Actual	Variance
	£m	£m	£m
Clinical income	429.9	433.5	3.6
Non-clinical income	37.5	41.9	4.4
Total income	467.4	475.4	8.0
Pay spend	-318.5	-322.1	-3.7
Non-pay spend	-143.1	-152.4	-9.3
Total spend before dividend, and interest	-461.6	-474.5	-13.0
Operating surplus before exceptional items	5.8	0.9	-5.0
Transition support	10.0	10.0	0
Sustainability & Transformation Funding	13.6	9.7	-3.9
Dividend, finance costs and interest	-19.3	-20.4	-1.1
Net surplus	10.2	0.2	10.0

#### Statement of comprehensive income 2016/17

Clinical income totalled £433.5m, and arose mainly from contracts with NHS Commissioners, including Vale of York Clinical Commissioning Group, Scarborough Clinical Commissioning Group, East Riding Clinical Commissioning Group, NHS England and local authorities (£431m), with the balance of (£2.5m) from other patient-related services, including private patients, overseas visitors and personal injury cases. Other income totalled £41.9m and comprised funding for education and training, research and development, and the provision of various non-clinical services to other organisations and individuals.

Under the terms of the agreement to acquire the former Scarborough and North East Yorkshire Healthcare NHS Trust, the Foundation Trust has received additional transition funding of £10m in 2016/17. Transitional support has now ended.

As part of the action to strengthen financial performance and accountability in the NHS, a £1.8bn Sustainability and Transformation Fund has been created nationally in 2016/17 and all trusts with an emergency care contract were allocated a proportion of the fund. The maximum allocation was £13.6m. Access to the funding was linked to both financial performance (70 percent) based on the achievement of an agreed quarterly financial control total and operational performance criteria (30 percent), which includes achievement of improvement trajectories for emergency care (12.5 percent), referral to treatment (12.5 percent) and cancer waiting times (5 percent). The Trust achieved £9.7m of the available £13.6m sustainability and transformation funding in 2016/17.

The Trust re-values all of its property fixed assets, including land, buildings and dwellings at the end of each year. This is to reflect the true value of land and buildings, taking into account in year changes in building costs, and the initial valuation of new material assets. In 2016/17, this revaluation gave rise to an impairment loss included in the operating loss above of (£1.7m).

At the end of the financial year, the Trust reported an income and expenditure surplus of ( $\pounds$ 0.2m), compared with a planned surplus of ( $\pounds$ 10.2m), in part due to the loss from the asset impairment of ( $\pounds$ 1.7m) and the failure to achieve the full sustainability and transformation funding ( $\pounds$ 3.9m); with the balance due to increased agency/ locum costs caused by medical recruitment difficulties and the loss of expected income following an arbitration process.





### Hospital Trust signs up to John's Campaign

The Trust signed up to a national campaign in December, which confirms its commitment to improving the experience of patients with dementia and their families when in hospital.

John's Campaign was founded after the death of Dr John Gerrard in November 2014, by his daughter Nicci, who believes her father, who suffered from Alzheimer's, would have benefited greatly if she had been able to stay with him during his time as an inpatient. Nicci now campaigns nationally for the right of carers of patients with dementia to be able to stay with their loyed ones while they are in he

to stay with their loved ones while they are in hospital.

Emma George, Assistant Director of Nursing, York Teaching Hospital NHS Foundation Trust, and the Trust's Lead for Dementia Care said: "We recognise the importance of listening to and involving carers when someone with dementia is in hospital as we know it leads to improved experience, quality of care and outcomes.

"We are promoting John's Campaign with staff across all our hospitals to gain their commitment to making carers feel welcome and supported. A new leaflet is being published, which makes it clear what carers of patients with dementia can expect whilst the patient is in hospital.

"Carers will be offered the flexibility to be with the patient when they are most needed, and that this



Signing up to John's Campaign

may often be outside of our regular visiting hours.

"As part of the Trust's commitment to making all visitors welcome, visiting times across all the Trust's wards have been extended to 11.00am-8pm, just in time for the festive period. We hope that patients and their friends and relatives will benefit from the change. All visiting is at the discretion of the nurse in charge of the ward, who will make sure that needs of all patients are respected; including dignity, privacy and the need for rest."

### Performance

The Trust uses a number of key performance measures to assess the success of the organisation, looking at both hospital and community measures. These measures include the 4-hour emergency care standard, cancer targets, infection controls standards, 18-week wait targets, data completeness targets and delivery of healthcare for people with learning disabilities.

On a monthly basis, the Finance and Performance Committee and the Board considers performance against these targets, and on a quarterly basis the Board confirms the position of each of these metrics to NHS Improvement, (formally Monitor). Details of the Trust's performance during the year can be seen in the table below.

The Board also reflects on the achievement of the key objectives identified in the Trust's strategy aims. The Quality and Safety Committee considers the achievements against the Quality Report priorities during the year to ensure the performance indicators included in the report are being achieved.

#### Performance against key healthcare targets in 2016/17

Indicator	Target	Q1	Q2	QЗ	Q4
Total time in ED under 4 hours – national	95%	87.3	91.4	82.9	83.17
Referral to treatment time, 18 weeks in aggregate, incomplete pathways	92%	92.5	90.8	89.4	89.4
Cancer 2 week wait (all)	93%	92.8	89.9	89.9	91.1
Cancer 2 week wait Breast Symptomatic	93%	95.6	93.3	97.1	94.6
Cancer 31 days from diagnosis to first treatment	96%	99.4	99.0	98.0	96.9
Cancer 31 days for second or subsequent treatment - surgery	94%	96.5	97.0	94.4	95.7
Cancer 31 days for second or subsequent treatment – drug treatment	98%	100	100	99.6	100
Cancer 62 day wait for first treatment (urgent GP)	85%	86.4	84.3	80.8	81.4
Cancer 62 day wait for first treatment (NHS Cancer Screening Referral Service)	90%	91	92.5	92.9	90.0
Diagnostics – 6 week wait referral to test	99%	99.3	99.2	99	99

The Trust has continued to implement the comprehensive performance recovery plan across the emergency care standard, referral to treatment times, diagnostic performance and cancer waiting times. This has driven a number of positive changes across the Trust, including a transformation at the front door of the Emergency Department at the York site, introduction of the Clinical Navigator role and the development of the acute medical model for the Scarborough site, improved breach analysis for acute care and investment in flow and bed management capacity. The Trust has implemented comprehensive capacity and demand modelling for admitted pathways, undertaken bed modelling and implemented ward reconfiguration to improve flow. The Trust has implemented waiting list initiatives to address the admitted backlog and is outsourcing additional capacity to reduce the admitted backlog.

The Trust had seen performance improvements as a result of these measures, with referral to treatment times, diagnostics and cancer 62 days achieving until the August 2016. The emergency care standard showed some improvement, with the trajectory met in Quarter 2 and performance significantly improved in July 2016. Due to a combination of factors including reduced theatre staffing, increased acuity of patients, high bed occupancy and winter surge pressures the improvement has not been sustained and achievement of the sustainability and transformation funding performance trajectory has not been achieved for in Quarter 3 or 4 for emergency care standard, referral to treatment time and 62 day target for cancer. The Return to Operational Standards Plan (March 2017) supported an improvement in the emergency care standard position in March, rising to 89.28 percent from 81.42 percent in February 2017.

There is a robust performance framework in place across all directorates, which achieved significant assurance through internal audit. The Trust is working with partners across the system to improve performance through the Accident and Emergency Delivery Board, the Cancer Alliance, with Clinical Commissioning Groups on planned care and through engagement with the sustainability and transformation plan.



In the news......In the news......In the news......In the news......In the news......In the news......

## Archbishop welcomes new chaplain to York Hospital

The Most Reverend & Right Honourable Dr. John Sentamu, Archbishop of York visited York Hospital in December, to lead a service at the Chapel and licence The Reverend Rachel Bailes as Lead Chaplain for York Teaching Hospital NHS Foundation Trust.

The Reverend Rachel Bailes was formerly chaplain at Mid Yorkshire Hospitals NHS Trust, starting her chaplaincy career at Dewsbury Hospital before moving to the new Pinderfields Hospital at Wakefield, where she has been for the last six years.

The Archbishop said: "I am delighted to be licensing Rachel to this significant post at York Hospital. I pray that all at York Hospital, staff, patients and visitors, will know God is with them in all that they face. My prayer for Rachel is that she will make that presence of Jesus Christ visible to all those she meets."

The Reverend Rachel Bailes said: "I feel passionate about spiritual care and the need to treat all people with dignity and respect and as unique individuals.

"Being in hospital can be a stressful experience for both patients and their loved ones and good, caring support for both patients and staff can make a real difference."



Welcoming the new Chaplain

### **Out of hospital care**



The Trust has signalled its commitment to delivering care out of hospital through the creation of an Out of Hospital Care Directorate. Initially this Directorate will incorporate the previous Community Services Directorate and the directorate of Allied Health Professionals and Psychological Medicine. This brings together a wide range of services, delivered in a range of settings both in the community and in an acute hospital setting. The ambition is to grow this Directorate, reflecting the increasing drive to provide care and support closer to home.

In last year's Annual Report the Trust described its vision for 'community first'. The Trust has developed an 'Out of Hospital Care Strategy' which sets out its vision for how the Trust will work within the local system to adopt a 'Community First' culture which focuses on prevention and self-care; delivers care closer to home and allows the system to manage growing demand by increasing efficiency through integration. The Directorate has worked with HealthWatch York to develop a reader friendly version of the document which is available on the Trust's website. The Directorate is currently undertaking 'Strategy Roadshows' with staff to identify the changes that need to be made to deliver the vision.

In the report, the Trust also explained how the Provider Alliance Board (which brings together those who provide health and care services, together with the voluntary sector) was developing a blueprint for a new model of integrated care in the community. The first phase of this has commenced in York, building on learning from integrated Community Response Teams in Selby and Ryedale. Health, social care and voluntary services that provide short term support to people to prevent them having to go into hospital or allows them to return home sooner following a hospital stay are coming together as 'One Team'. As part of the Directorate's commitment to co-designing services with the people who use them, the Directorate have held a number of focus groups with service users and representative groups. Volunteers from these groups are forming a Public Reference Group which will work as part of the project to bring the services together.

The report also highlighted that being in hospital when you don't need to be can be bad for people. As well as the risks of infection, research shows that for an older person 10 days of bed rest can cause the equivalent of 10 years of muscle aging. The loss of independence and confidence can make it far harder for people to return to their own homes. The hospital setting is not a good place to try and assess people's long term needs, especially when someone is recovering from a period of illness. The Trust has worked with local partners to change how and where assessments of people's needs are carried out. Through a 'supported discharge' approach the Trust has enabled over 140 people to return home sooner, with support.

As a result of the commitment to deliver more services closer to home, in December 2016 the Archways Intermediate Care Unit in York closed and the resources released were reinvested into an expanded range of community services. This will mean that only those patients who cannot be managed at home (or in their usual place of residence) with support are admitted into an inpatient bed. Reinvesting the resources released from closing Archways into community based services will provide an alternative for those patients who do not need to be in a hospital bed. The services that were delivered from Archways are now provided through an expanded York Community Response Team (who provide nursing and therapy support to people in their own home) and other appropriate support services enabling a greater number of patients to be supported at home.

#### These services include:

- Expanded Community Response Team allied health professionals, nurses and generic support workers who work as part of a multidisciplinary team providing nursing, therapy and social care interventions
- Community Discharge Liaison Service ensuring that patients receive the most appropriate community service appropriate to their level of need
- Advanced Clinical Practitioners providing enhanced assessment, diagnosis and treatment of patients in their own homes
- Outreach Pharmacy providing support in managing multiple medicines following discharge from hospital.

### Out of hospital care | Our Year



#### **Our Year** | In the news



## **New Urology One Stop Clinic opened**

#### A new Urology One Stop Clinic was officially opened at Malton Community Hospital in January 2017.

The new One Stop Clinic, which was officially opened by The Most Reverend & Right Honourable Dr. John Sentamu, Archbishop of York, is an enhanced service for all urology patients across the region, which allows fast access to diagnosis and treatment. In contrast to traditional services, patients will only require one appointment and will leave the clinic with a treatment plan.

The concept of a single assessment and

diagnostic centre successfully brings together the common aspects of urological diagnosis and outpatient services under one roof. Consultation and diagnosis mean that patients stay within the clinic, while stopping off at various points to see a specialist, have an examination and undergo various tests.

Mr Graeme Urwin, Consultant Urologist, York Teaching Hospital NHS Foundation Trust, explained more: "Patients are often worried when they are referred to us, so we wanted to design a system which was both kind to the patient and efficient.

"The development of this clinic means that patients who may have needed to come to the hospital up to four times, often over several weeks, for their tests and results, now come for the morning or afternoon and

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One Stop Clinic opening

have their tests undertaken while they are here.

"This means that, for most patients, by the end of the clinic they are either reassured there is nothing wrong or they have discussed a treatment plan with their specialist. We believe that this approach is truly patient-centred and will be safe, timely, equitable and of high quality."

The clinic is led by a team of highly trained urology specialists headed by consultant urologists. To enable the clinic to run as efficiently as possible the specialist team also includes doctors, specialty registrars, urology nurse specialists, radiographers and ultrasonographers.

#### In the news | Our Year



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## New Energy Centre opens at Scarborough Hospital

Thursday 23 March, marked NHS Sustainability Day, the perfect occasion to celebrate the official opening and handover of the refurbished, lowcarbon Energy Centre at Scarborough Hospital, which has been delivered by Vital Energi.

The Trust is committed to reducing its carbon footprint through the work of its Sustainable Development Group. The refurbishment of the Scarborough Hospital energy centre will help make a large step towards reducing the Trust's carbon footprint.

The £3.2m project will achieve guaranteed savings of £512,000 in the first year - a 31 percent reduction on current energy bills and operating costs. Over the course of 15 years the guaranteed savings will be in excess of £9m.

The unit will supply all of the hospital's night time electricity, over 70% of its day time electricity and make a substantial contribution to the heating and hot water supply.

Brian Golding, Director of Estates and Facilities, explained: "As an organisation, we are very much aware of sustainability issues and are committed to reducing our environmental impact. Our sustainable development group ensures that we are consistently addressing energy consumption across all our hospitals, looking at everything from light bulbs through to the design of new buildings.

"In 2014 we completed a major energy saving and carbon reduction project at York Hospital using a Carbon and Energy Fund Framework with Vital Energi, and



Energy centre opening

last year we completed a major reduction project at Bridlington Hospital. Including the refurbishment here at Scarborough Hospital, the overall project will offer over £26.5m guaranteed saving for the Trust - money which will be reinvested into patient care. Across the three sites, carbon emissions are projected to be cut by 5,800 tonnes a year, a reduction of around 27.6 percent."

Ashley Malin, Project Development Director for Vital Energi explained: "York Teaching Hospital NHS Foundation Trust was one of the first in the UK to embrace this type of energy infrastructure upgrade, with guaranteed returns."

## Research

The aim of clinical trials is to increase knowledge about treatments to ensure we are treating based on the best possible evidence. Research offers participants the opportunity to be involved in research, which may or may not be of benefit to them.

Yorkshire and Humber (Y&H) is one of 15 regions that form part of the Clinical Research Network (CRN). Every CRN is targeted with a figure by the National Institute for Health (NIHR) on the number of patients entered into a clinical trial in a given financial year. As Y&H is 10 percent of the national population, we are expected to meet 10 percent of the national NIHR target, which puts our regional annual target at 65,000.

To reach the 65,000 the Y&H CRN required, our hospital was set a target of 3,539 patients accrued into clinical trials in our Trust from 1 April 2016 to 31 March 2017. We exceeded this target as we had 147 research studies open to recruitment in York and Scarborough, which resulted in 4,588 patients being recruited into clinical trials last year.

These patients were recruited across a wide range of specialties as most of York Hospital now recruits patients into clinical trials. Listed below is the range of studies the Trust is part of as of 31 March 2017.

	Number of studies active and recruiting	Number of studies active and in follow-up
Anaesthetics	8	З
Cancer and Oncology (York)	26	24
Cancer and Oncology (Scarborough)	14	21
Cardiology	5	6
Dermatology	5	З
Emergency Department	8	З
Clinical Research Facility	З	0
Gastroenterology	2	З
Generic Team (York)	19	2
Generic Team (Scarborough	25	8
Neurology	0	2
Obstetrics	5	2
Ophthalmology	9	4

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	Number of studies active and recruiting	Number of studies active and in follow-up
Palliative Care	З	1
Paediatrics	7	1
Renal	8	4
Rheumatology	7	4
Sexual Health	4	2
Stroke	7	0

#### Some of our research highlights from this year have been:

- Anaesthesia, Periop Medicine and Pain Specialty Group which now sees York Hospital recruit 25 percent of the total number of patients in clinical trials in England. For example we were the highest recruiters in the region for the PROBESE trial. The trial is aimed at studying protective Ventilation during general anaesthesia for surgery obese patients
- Ophthalmology where we were the highest recruiters in the UK for a study called SAFARI that reviewed drugs in patients with age related macular degeneration
- Cardiology where we recruited the first UK patient in a clinical trial called ARIADNE which was looking at new drugs for patients with heart failure
- We recruited 150 patients into a clinical trial called PRIDE that was aimed at looking at micronutrients in the blood of
  pregnant women at risk of gestational diabetes; and over 100 patients into a trial called VESPA looking at scanning in
  ladies in the early stage of pregnancy
- Our haematology/ oncology team for being the highest recruiters in the region for the Facilitating Informed Decision Making in Haemato-Oncology (FIDO) trial, so far the team have recruited over 400 patients to this trial. The trial is aimed at how patients make decisions about their care with questionnaires before and after clinical appointments
- We were also the top recruiters in the UK a Rheumatology study that was following patients with Rheumatoid Arthritis given immunosuppressant drugs for the first time
- Our hospital is also part of the Yorkshire Health Study which is a questionnaire style study and so far we have recruited over 700 patients.

Finally, one of our studies our hospital is running together with the Vale of York Clinical Commissioning Group to look at whether Proactive Health Coaching for patients can reduce the burden on A&E won an award at the regional Medipex Innovation Awards. York Hospital consultant Dr James Turvill was also awarded for his work on integrating Faecal Calprotectin Testing into the Primary Care Pathway.

## **Board of Directors**

The Board of Directors has a strategic focus - developing, monitoring and delivering plans. The Board members have collective responsibility for all aspects of the performance of the Trust including finance, patient safety, management and governance. As a Foundation Trust the Board of Directors works in partnership with the Council of Governors to ensure the organisation is delivering the community's healthcare needs.

Some of our Board meetings are held in public and anyone is welcome to attend. You can find the dates for the meetings, along with the agenda and papers on our website: www.york.nhs.uk

The Board membership during the year was as follows:



Ms Susan Symington – Chairman



Mr Patrick Crowley - Chief Executive



Mr Philip Ashton – Nonexecutive Director, Chair of the Audit Committee and Senior Independent Director



Mrs Jennifer Adams -Non-executive Director



Mr Mike Keaney -Non-executive Director



Ms Libby Raper -Non-executive Director

#### Board of Directors | Our Year



Mr Michael Sweet -Non-executive Director



Professor Dianne Willcocks - Non-executive Director and Vice Chair



Mrs Jenny McAleese -Non-executive Director



Mr Andrew Bertram – Executive Finance Director



Mr Jim Taylor – Executive Medical Director



Mr Mike Proctor - Deputy Chief Executive



Mrs Sue Holden – Director of Workforce and Organisational Development (left the organisation in October 2016 following a secondment)



Mrs Beverley Geary - Chief Nurse



Mrs Juliet Walters - Chief Operating Officer



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There are, as ever, many challenges to be addressed, and this is the nature of the services we provide. However, I am confident that the commitment of our staff to doing the very best for our patients, whatever the circumstances means we are well placed to meet these challenges

**Patrick Crowley, Chief Executive** 





Award

# Meet our stars...



Our reward and recognition programme highlights teams, individuals and volunteers who go above and beyond to make a difference for patients and colleagues. The Star Award is given monthly to those who demonstrate the Trust's values, and the annual Celebration of Achievement awards recognise teams and individuals across a range of categories including safety, innovation and patient experience.

# Find out more...

To learn more about us or to read our full annual report and accounts for 2016/17 visit: www.york.nhs.uk



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