

Report of the Head of Democratic Services

Report to West Yorkshire Joint Health Overview and Scrutiny Committee

Date: 19 November 2019

Subject: West Yorkshire Association of Acute Trusts (WYAAT) – update

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has consultation been carried out?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for call-in?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

1. Purpose of this report

- 1.1 The purpose of this report is to introduce an update around the West Yorkshire and Harrogate Health and Care Partnership (the Partnership) acute care collaboration priority; the West Yorkshire Association of Acute Trusts (WYAAT) collaborative forum and the associated Committee in Common.
- 1.2 The WYAAT annual report, published in September 2019, is appended to this report and provides an outline of progress since the previous report to the Joint Committee in December 2018.

2. Background information

- 2.1 The West Yorkshire Association of Acute Trusts (WYAAT) was established in 2016 and represents a partnership of the following 6 acute trusts in West Yorkshire and Harrogate:
 - Airedale NHS Foundation Trust (ANHSFT)
 - Bradford Teaching Hospitals NHS Foundation Trust (BTHFT)
 - Calderdale and Huddersfield NHS Foundation Trust (CHFT)
 - Harrogate and District NHS Foundation Trust (HDFT)

- Mid Yorkshire Hospitals NHS Trust (MYHT)
- Leeds Teaching Hospitals NHS Trust (LTHT)

2.2 In December 2018, the Joint Committee considered a report that provided a description of the WYAAT collaborative forum, alongside a summary of the 12 programme areas that contributed to the acute care collaboration priority (at that time), as follows:

- Corporate Support Services
 - Procurement
 - Estates & Facilities
 - Information Management & Technology
 - Workforce
- Clinical Support Services
 - Scan4Safety
 - Pharmacy
 - Pathology
 - Radiology (Yorkshire Imaging Collaborative) - Transformation
 - Radiology (Yorkshire Imaging Collaborative) - Technology
- Clinical Services
 - Service Sustainability
 - Elective Surgery
 - WY Vascular Services

2.3 The Joint Committee was previously advised that to improve and sustain care services throughout the 6 member Trusts, the focus of WYATT was around collaboration and standardisation of provision.

2.4 The Joint Committee was further advised that WYAAT provided a forum for partners to discuss programmes of work aligned with the West Yorkshire Health and Care Partnership, however decision-making on service provision remained vested with the individual partner Trusts.

2.5 A full extract from the approved minutes of the meeting held on 5 December 2018 is attached at Appendix 1. This summarises the discussion and outcomes from the previous discussion.

3. Main issues

3.1 The WYAAT annual report, published in September 2019, is appended to this report and provides an outline of progress since the previous report to the Joint Committee in December 2018.

3.2 In considering the details presented, the Joint Committee may find it useful to consider the following agreed aims and criteria for working jointly across the Partnership:

- To achieve a critical mass beyond local population level to achieve the best outcomes;
- To share best practice and reduce variation; and
- To achieve better outcomes for people overall by tackling 'wicked issues' (i.e., complex, intractable problems).

- 3.3 At its previous meeting on 10 September 2019, the Joint Committee requested a specific update on matters associated with potential changes to dermatology services. This followed receipt of some concerns identified by dermatology patients that had been brought to the attention of the Joint Committee.
- 3.4 It should be noted that at its meeting in December 2018, the Joint Committee was advised that there were plans to appoint project managers to establish clinically led service improvement programmes for Ophthalmology, Dermatology and Gastroenterology (as part of the Service Sustainability Programme). This is also confirmed in the attached WYAAT report.
- 3.5 Appropriate NHS representatives have been invited to the meeting to discuss the details presented and address questions from the Joint Committee

4. Corporate considerations

4.1 Consultation and engagement

- 4.1.1 Public and service user engagement and consultation are key considerations for the West Yorkshire and Harrogate Health and Care Partnership across all of its programme areas.
- 4.1.2 The Joint Committee may wish to give specific consideration to any specific engagement and consultation activity that may be required in relation to particular elements of the attached update report.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 No specific implications have been identified as part of this report.
- 4.2.2 The Joint Committee may wish to give specific consideration to any equality and diversity implications relevant to particular elements of the attached update report.

4.3 Council policies and best council plan

- 4.3.1 No specific implications have been identified as part of this report.
- 4.3.2 The Joint Committee may wish to give specific consideration to any specific policy issues relevant to any constituent local authority and associated with particular elements of the attached update report.

Climate emergency

- 4.3.3 No specific implications have been identified as part of this report.
- 4.3.4 The Joint Committee may wish to give specific consideration to any climate emergency implications relevant to particular elements of the attached update report.

4.4 Resources and value for money

- 4.4.1 No specific implications have been identified as part of this report.
- 4.4.2 The Joint Committee may wish to give specific consideration to any resource and value for money implications relevant to particular elements of the attached update report.

4.5 Legal implications, access to information, and call-in

- 4.5.1 There are no specific access to information implications arising from the report and decisions of external bodies are not eligible for Call In.
- 4.5.2 The Joint Committee may wish to give specific consideration to any legal implications relevant to particular elements of the attached update report.

4.6 Risk management

- 4.6.1 No specific implications have been identified as part of this report. .
- 4.6.2 The Joint Committee may wish to give specific consideration to any identified risks (and associated mitigations) relevant to particular elements of the attached update report.

5. Recommendations

- 5.1 The West Yorkshire Joint Health Overview and Scrutiny Committee is asked to consider the details presented in this report and the associated appendices; and agree any specific recommendations and/or further scrutiny activity.

6. Background documents¹

- 6.1 None

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

Extract from the minutes of the West Yorkshire Joint Health Overview and Scrutiny Committee meeting held on 5 December 2018.

West Yorkshire and Harrogate Health and Care Partnership: Acute Care Collaboration and the West Yorkshire Association of Acute Trusts

The Joint Committee received a report of Leeds City Council's Head of Governance and Scrutiny Support introducing an update report from West Yorkshire and Harrogate Health and Care Partnership on acute care collaboration and the West Yorkshire Association of Acute Trusts (WYAAT). The report detailed the WYAAT collaborative forum and a summary of each of the 12 current programme areas that contribute to the acute care collaboration priority.

The following were in attendance:

- *Matt Graham, WYAAT Programme Director*
- *Ian Holmes - Director, West Yorkshire & Harrogate Health & Care Partnership.*

Matt Graham, WYAAT Programme Director, presented the report and highlighted the following:

- *The focus of WYATT was collaboration and standardisation of provision to improve and sustain care services throughout the 6 member Trusts.*
- *WYAAT provided a forum for partners to discuss the 12 programmes of work which were fully aligned with West Yorkshire Health and Care Partnership.*
- *Decisions on service provision remain vested with the partner Trusts.*

Joint Committee discussions focussed on the following:

- *How the WYATT programme outcomes were monitored, measured and reported. Members emphasised the importance of public accountability. Using pharmacy as an example, the response was noted that each programme had a clear set of metrics to evaluate benefits – such as financial benefits, stock control and freeing-up pharmacist's time to conduct clinical work. Additionally, WYAAT was developing a website where programmes and outcomes would be available in 2019.*
- *Whilst acknowledging the assurance that WYAAT itself was not a decision making body – all decisions remain with the partner Trust's Boards and clinicians, Members also noted the influence that discussions at WYAAT level could have on future service provision and the decisions that were made when considering a business plan for each programme of work.*
- *Noting that the detail of the 12 programmes was not yet available; it was agreed that the current position in terms of progress against anticipated outcomes for each of the programmes would be provided directly to Members of the Joint Committee.*
- *The need to identify a timeframe for the delivery of each of the 12 programmes.*
- *The need to provide the Joint Committee with case studies of how WYAAT's work benefits both patients and the NHS and to inform the Joint Committee when a programme delivery aim had been achieved.*
- *The links between WYAAT partners and primary care providers.*

Specific matters were identified for further consideration –

- *Clarity on the aim of "optimising estates" within the Elective Surgery work stream was requested.*
- *How the Workforce transformation has been consulted on and is being implemented and managed.*

- How risks are identified and managed, particularly in respect of the Procurement programme; and WYAATs role/influence should the expected benefits of any programme area not be fully achieved.
- The role of mutual accountability between the representatives of the 6 Trusts.
- The costs associated with the establishment of WYAAT and any financial benefits brought through closer collaboration.
- Service provision within the more rural areas covered by the Partnership and how this was reflected within the work of WYAAT.

In conclusion, the Chair acknowledged the reassurance provided that the work of WYAAT linked through to the West Yorkshire and Harrogate Health and Care Partnership (the Partnership) and primary care providers. The Chair reiterated the importance of the role of the Joint Committee in monitoring the success of that partnership – and therefore the work of WYAAT. The Chair also reiterated the need for app partners within the Partnership to have regard to patient flow through health and care services and the needs of patients to access the right services across the individual Trusts and the wider Partnership areas.

On behalf of the Joint Committee the Chair thanked representatives for their attendance, presentation and contribution to the discussion.

RESOLVED -

- a) *To note the West Yorkshire Association of Acute Trusts' aims and principles of collaboration;*
- b) *To note the West Yorkshire Association of Acute Trusts' role within the West Yorkshire and Harrogate Health and Care Partnership; and,*
- c) *To note the 12 programmes within the identified acute care collaboration priority (Hospitals Working Together portfolio).*
- d) *To note the contents of the discussions which identified any specific scrutiny actions and/or future activity associated with the details presented.*
- e) *To note the intention for the relevant officer to provide the current position in terms of progress against anticipated outcomes for each of the 12 WYAAT programme areas to Members of the Joint Committee.*