

## **WEST YORKSHIRE ASSOCIATION OF ACUTE TRUSTS UPDATE NOVEMBER 2018**

### **1. INTRODUCTION**

The West Yorkshire Association of Acute Trusts (WYAAT) was established in 2016 with the first formal meeting of the Committee in Common (CIC) on 12 December 2016. It is a partnership of the 6 acute trusts in West Yorkshire and Harrogate (WY&H):

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

The 6 trusts are part of the WY&H Health and Care Partnership (HCP) and WYAAT is recognised as an important part of its governance. WYAAT provides a strong voice for the acute trusts into the HCP and acts as the vehicle for delivery of its acute hospitals' collaboration programme (known as "Hospitals Working Together").

The trusts agreed a Memorandum of Understanding (MOU) in April 2017 which sets out how the partnership works and the commitment of each trust to collaboration with the others. The philosophy is that WYAAT is the combination of the trusts, not a separate organisation; WYAAT does not deliver programmes for the trusts, the trusts deliver them together supported by the WYAAT programme management office (PMO).

Since the end of 2016, WYAAT has developed Hospitals Working Together into a portfolio of twelve programmes covering corporate support, clinical support and clinical services. Each programme is led by a Chief Executive, Executive Director and Medical Director, supported by a programme manager from the WYAAT PMO.

This report provides an update on WYAAT's progress and development. It sets out the aims and key principles for the collaboration between the trusts and outlines the association's governance and resources. It describes WYAAT's role within the WY&H HCP and provides a summary of the current position of the 12 "Hospitals Working Together" programmes.

### **2. RECOMMENDATION**

The West Yorkshire Joint Health Overview and Scrutiny Committee is requested to note:

- WYAAT's aims and principles of collaboration
- Its role within the WY&H HCP
- The 12 programmes within the Hospitals Working Together portfolio.

### **3. AIMS AND PRINCIPLES OF COLLABORATION**

The purpose of the association, as set out in the MOU, is for the trusts to work together on behalf of patients and the population to deliver the best possible experience and outcomes within the available resources for corporate and acute services across the WYAAT service area. The aim is to organise around the needs of the WY&H population rather than planning at individual organisational level so as to deliver more integrated, high quality, cost effective care for patients.

The MOU also sets out five key principles for WYAAT's approach to collaboration:

- Developing a “Centres of Excellence” approach to higher acuity specialties, eliminating avoidable cost of duplication and driving standardisation.
- Developing WY&H standardised operating procedures and pathways across services, building on current best practice and using Getting It Right First Time (GIRFT) to drive out variations in quality as well as operational efficiency and facilitating safer free movement of bank staff across providers.
- Collaborating to develop clinical networks and creating alliances as a vehicle which will protect local access for patients whilst consolidating skills (and therefore resilience) and reducing operational cost of duplicated facilities.
- Developing workforce planning at scale to secure the pipeline of fit for purpose staff and improved productivity, managing workforce risk at system level and supporting free movement of bank and agency staff under single shared Bank arrangements with the aim of reducing spend on agency and reduce the administrative costs of the flexible workforce.
- Delivering economies of scale in back office and support functions eg procurement, pathology, estates and facilities management and other infrastructure.

### **4. ROLE WITHIN THE WEST YORKSHIRE AND HARROGATE HEALTH AND CARE PARTNERSHIP**

With the advent of Sustainability and Transformation Partnerships in 2016, the 6 acute trusts and WYAAT became a core part of the WY&H HCP. Through WYAAT the acute trusts are able to provide a strong and consistent voice into the HCP. Over the last year this has been particularly beneficial in making the case for WY&H becoming an Integrated Care System (ICS). This has included supporting the lead Chief Executive for the HCP, Rob Webster, to make the case for WY&H in meetings with national and regional leaders of NHS Improvement and NHS England; developing the Strategic Narrative to demonstrate the coherence of our work; and contributing to the development of the WY&H MOU and ensuring it was supported by the trusts. Having a single acute trust view on the issues and decisions facing WY&H helps simplify decision making.

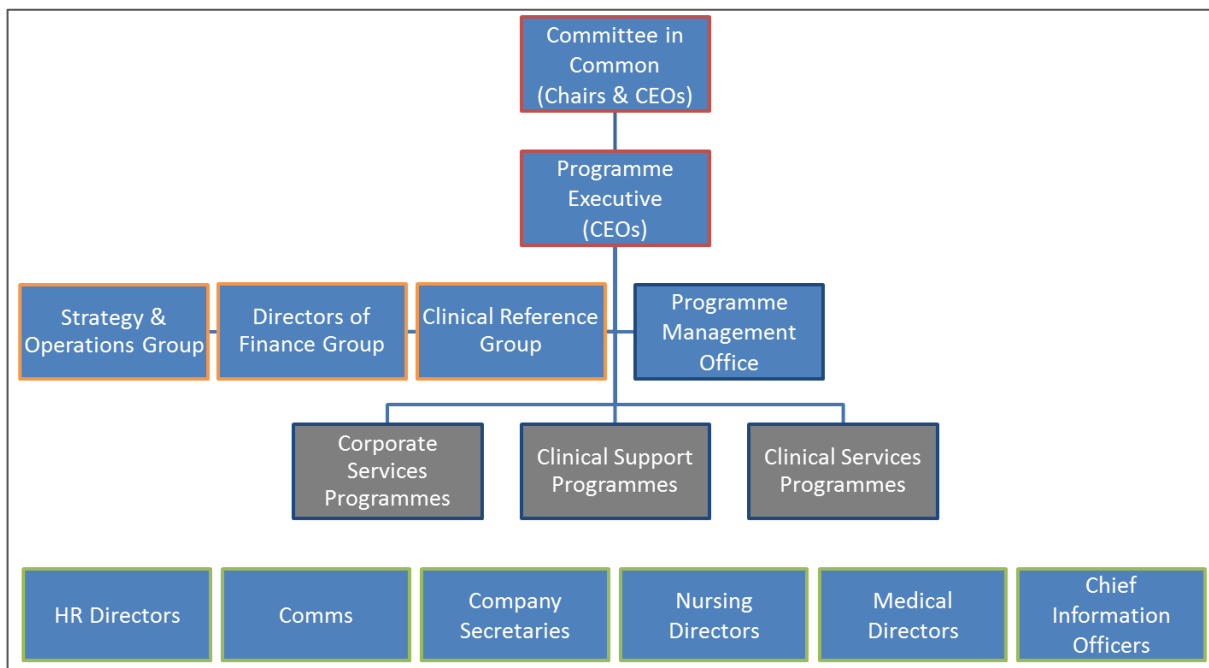
WYAAT's second role within the HCP is delivery of the “Hospitals Working Together” portfolio. Currently this consists of 12 programmes covering the full range of activities in our hospitals from support services such as procurement and information technology, to clinical support services such as pharmacy, and clinical services such as elective orthopaedics.

## 5. GOVERNANCE

The MOU establishes a “Committee in Common” (CIC) which meets quarterly to oversee the trusts’ collaboration through WYAAT. The CIC consists of the Chairs and Chief Executives of the six trusts and is chaired by one of the Chairs on a 6 month rotating basis. Its purpose is to facilitate coordinated decision making by the trust boards; no powers have been delegated to the CIC.

The Programme Executive, consisting of the 6 Chief Executives, meets monthly to oversee delivery of the WYAAT collaborative programme and its workstreams, including Hospitals Working Together. It also reviews papers and proposals from WY&H HCP programmes, commissioners, other providers, System Oversight and Assurance Group, System Leadership Executive and other groups to ensure that WYAAT representatives can present a shared WYAAT view on the issues and on any decisions required.

The Programme Executive is supported by the WYAAT PMO, the programme boards for each of the WYAAT programmes and by functional collaborative groups, such as the Medical Directors’, Strategy & Operations and Directors’ of Finance groups (Figure 1).



**Figure 1 - WYAAT Governance**

WYAAT has a robust governance framework which defines how the programmes are managed. It sets standards for the programmes on:

- Leadership, including a Chief Executive senior responsible officer (SRO), executive lead and medical director lead for every programme
- Management, including documentation, planning, risk and benefits management
- Lifecycle and Decision Making

## 6. RESOURCES

The WYAAT trusts have committed substantial resources to their collaborative work, both in terms of funding for the WYAAT PMO and, as importantly, through the commitment of their executives and staff to the delivery of the programmes. It is important to note that the PMO does not deliver programmes for the trusts; it supports and facilitates the delivery of the programmes by the trusts themselves. This is critical to ensure that the programmes are owned by the trusts but means that collaborative working is a substantial commitment for them, particularly at executive and senior clinical/management levels.

For 2018/19, WYAAT has a budget of around £1.5m to deliver its programmes (not including the cost of trust staff time) with the vast majority provided by the trusts. This budget funds the WYAAT PMO and the other costs of delivering the programmes, predominantly external expertise in specific areas such as pharmacy supply chain. The WYAAT PMO consists of 18 full and part-time staff including the programme director, clinical leads and programme managers.

## 7. PROGRAMMES

As part of the WY&H HCP, WYAAT delivers the “Hospitals Working Together” or acute care collaboration portfolio of programmes. The CIC is specifically charged in the MOU with “overseeing a comprehensive system wide collaborative programme to deliver the objective of an acute provider transformation to a more collaborative model of care for the WYAAT service area, the intention being to deliver a system model, operating as a network, that is coherent, integrated, consistent (reducing unwanted variation) and focused on quality and value for the population and patients”. The portfolio was confirmed through the HCP “Check and Confirm” process in February 2018. The current portfolio consists of 12 programmes covering corporate support services (including an additional programme, Scan4Safety, added since February), clinical support services and clinical services which are listed below, with further details provided in Appendix A.

- 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

## **7.1 BENEFITS**

Some examples of the benefits that the programmes have delivered or are expected to deliver are described below.

### **7.1.1 Quality**

- **Elective Surgery.** By improving the information provided to patients ahead of surgery, the programme is expected to improve patient experience because patients will better understand what to expect after surgery. By helping patients to prepare better for surgery and to mobilise more quickly after surgery it is expected to improve outcomes too.
- **Pharmacy.** A regional supply chain will reduce the requirement for pharmacists to manage a medicines warehouse releasing them for clinical pharmacy duties. It will also support standardisation of medicines across WY&H which will reduce the risk of medication errors.
- **Radiology.** Procurement of a shared Picture Archiving and Communications System will enable imagery to be shared between all trusts in WY&H which will ensure clinicians have access to all imagery for a patient. This will help clinicians make better and more rapid decisions, as well as avoiding duplication of imagery. A shared radiology reporting system will increase access to specialist radiology opinion for all patients in WY&H.
- **Scan4Safety.** By enabling trusts to electronically record the products used to treat patients, Scan4Safety massively reduces the time to identify affected patients if problems are found with a batch of products. Previously this required a manual search of paper records which could take days, but Scan4Safety reduces this to minutes.

### **7.1.2 Workforce**

- By bringing together clinical and other staff from all the hospitals in WY&H, the WYAAT programmes are building relationships between teams which enable closer working, sharing of best practice, smoother transfers of care when patients move between organisations and many other, less tangible benefits.
- Making it easier for clinical staff to work across multiple organisations by agreeing to recognise each other's recruitment checks and mandatory training.
- Enabling medical staff to provide additional shifts in any hospital across WY&H which will increase the resilience of our services, reduce agency costs and offer more opportunities to our staff.

### **7.1.3 Financial**

- **Procurement.** Almost £1m of savings have been delivered through collaborative procurement, with a further £500k in progress and additional opportunities being continually identified.
- **Radiology.** Procurement of a shared Picture Archiving and Communications System has reduced the total annual charge paid by the trusts. The programme has also been allocated £6m of national capital funding to implement a system to allow shared reporting of imagery across WY&H.

- Scan4Safety. Scan4Safety has been allocated £15m of NHS capital funding and by enabling us to manage our supplies more effectively, it is expected to deliver very substantial annual financial savings.
- Elective Surgery. The orthopaedic clinical leads are working together with our procurement experts to reduce the costs of the surgical implants we use with potential savings of around £1m

## **7.2 MILESTONES**

While some of the programmes, such as Procurement and Workforce, are pursuing a wide range of on-going workstreams, a number of programmes are approaching major milestones:

- Scan4Safety.
  - Trust board approval of the business case to secure £15m capital funding from NHS Improvement by 30 November
  - Submission of the approved business case to NHS Improvement in December 2018
  - NHS Improvement confirmation of capital funding expected by March 2019
- Pharmacy
  - Completion of the procurement phase in December 2018
  - CIC and trust board approval of the full business case in January-March 2019
  - Initiation of the implementation phase in Q1 2019/20
- Pathology
  - CIC and trust board approval of the Strategic Outline Case in January-March 2019
- Radiology (Yorkshire Imaging Collaborative) - Transformation
  - Trust board approval of the business case to secure £6m capital funding from NHS Improvement by 30 November
  - Submission of the approved business case to NHS Improvement in December 2018
  - NHS Improvement confirmation of capital funding expected by March 2019
- Radiology (Yorkshire Imaging Collaborative) - Technology
  - ANHSFT planned to go live on the shared PACS system in February 2019
  - Roll out of the system complete across all trusts by November 2019

## **8. CONCLUSION**

Over the last year, WYAAT has built on the firm foundations established through the MOU, initial programmes and PMO to mature into a strong partnership between the trusts. It is recognised as one of the most effective parts of the WY&H Partnership both in terms of programme delivery and its ability to offer a consistent acute provider view to the system.



It now has a broad portfolio of programmes which are making good progress, with a number having already delivered real benefits to the trusts.

As set out in section 2, the West Yorkshire Joint Health Overview and Scrutiny Committee is requested to note:

- WYAAT's aims and principles of collaboration
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## **APPENDICES**

- A. WYAAT Programme Summaries
- B. Glossary Of Acronyms