

Annual Members Meeting 2022

Welcome

The meeting will
start at 5.00 pm

Executive Team



Brendan Brown
Chief Executive



Anna Basford
*Director of Transformation
and Partnerships*



David Birkenhead
Executive Medical Director



Robert Birkett
Managing Director Digital Health



Gary Boothby
Executive Director of Finance



Suzanne Dunkley
*Executive Director of Workforce
and Organisational Development*



Jo Fawcus
Chief Operating Officer



Victoria Pickles
Director of Corporate Affairs



Lindsay Rudge
Chief Nurse



Stuart Sugarman
*Managing Director of Calderdale
and Huddersfield Solutions Ltd*

Chair and Non-Executive Directors



One Culture of
care

Calderdale and Huddersfield
NHS Foundation Trust

**Annual Report and Accounts
2021/22**

www.cht.nhs.uk

compassionate
care

One Culture of
care

Calderdale and Huddersfield
NHS Foundation Trust

**Annual Report
Summary
2021/22**

www.cht.nhs.uk

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Calderdale and Huddersfield
NHS Foundation Trust

**Quality Account
2021/22**

Overview of the Council of Governors Contribution 2021/2022

Presented by:

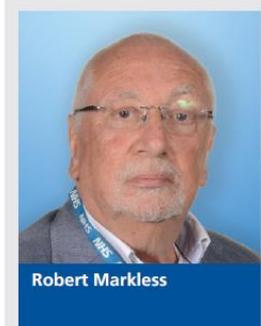
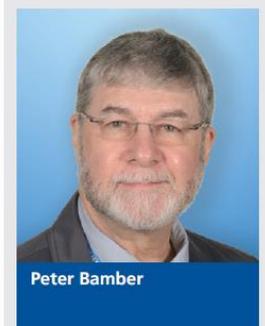
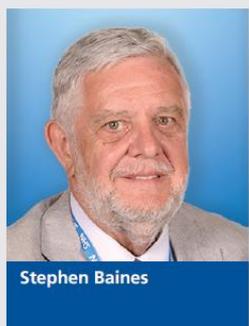
Stephen Baines
Lead Governor

Our Council of Governors



Calderdale and Huddersfield
NHS Foundation Trust

Elected Public Governors



Our Council of Governors



Calderdale and Huddersfield
NHS Foundation Trust

Elected Staff Governors



Our Council of Governors



Calderdale and Huddersfield
NHS Foundation Trust

Appointed Governors



Abdirahman Duaale

*Calderdale and Huddersfield
Solutions Ltd. (CHS)*



Dr Sara Eastburn

University of Huddersfield



Karen Huntley

*Healthwatch Kirklees and
Calderdale*



Chris Reeve

Locala



Cllr Megan Swift

Calderdale Metropolitan Council



Cllr Lesley Warner

Kirklees Metropolitan Council



Salma Yasmeen

*South West Yorkshire Partnership
NHS Foundation Trust*

Extension of Governor Tenures 2021/22

Presented by:
Helen Hirst, Chair

Extended Term Governors



Stephen Baines
Skircoat and Lower
Calder and Valley



Veronica Woollin
North Kirklees



John Gledhill
Lindley and the Valleys



Sally Robertshaw
Allied Health
Professionals

CHFT Commitment to our Older and Frail Population

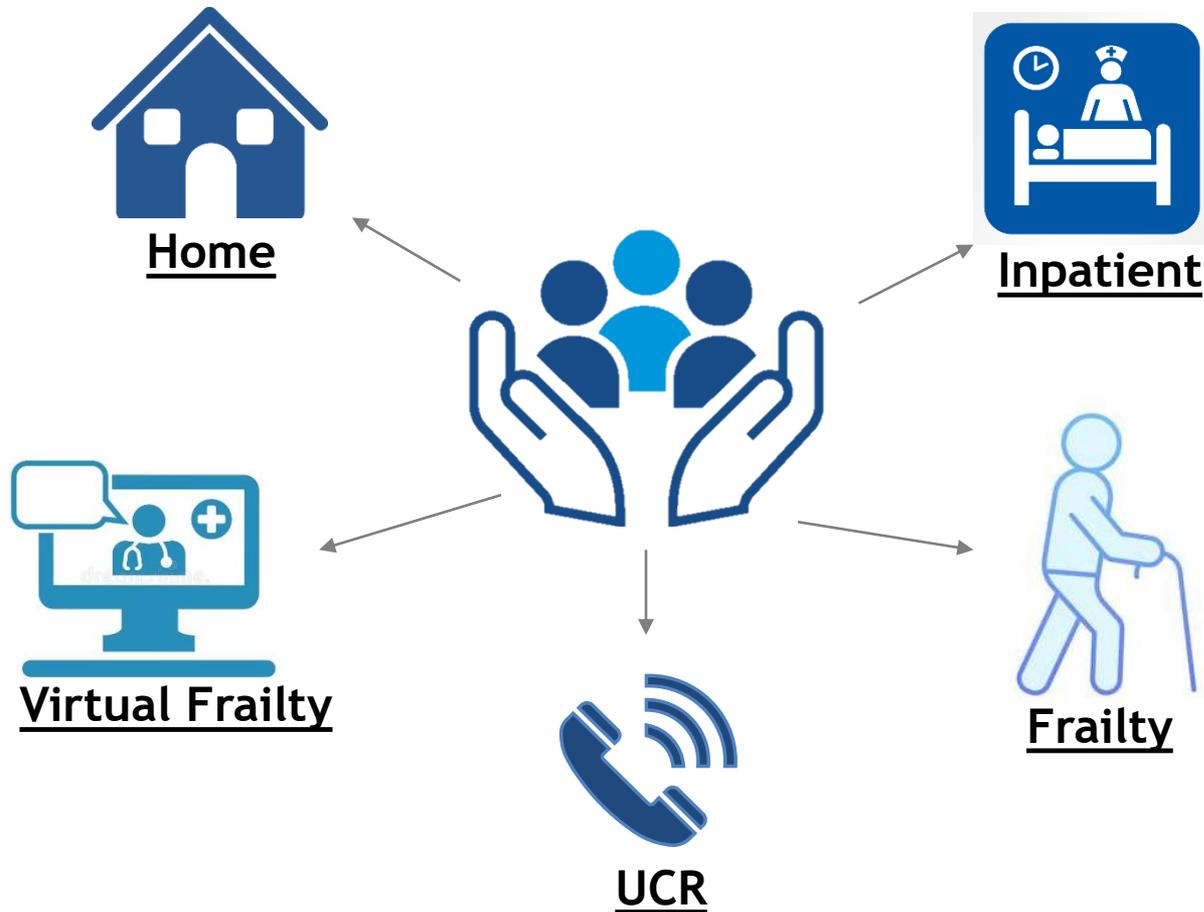
Presented by:

Renee Comerford, Nurse Consultant for Older
People and Clinical Lead for Urgent Community
Response and Virtual Ward



A moment to reflect

How have our Older People services evolved?



Integrated Vision

The CHFT frailty service provides an integrated service to patients living with frailty. The service reaches across acute, primary and third sector partnerships to ensure specialist, accessible and compassionate care is delivered timely. Promoting a culture of **right care, by the right person, in the right place and at the right time.**

- The benefits of an integrated service will bring for our population will mean;
 - Improved patient experience
 - Improved outcomes
 - More efficient use of resources across the system
- Additional benefits is to achieve a reduction in hospital bed usage through;
 - Reducing the total bed days for this patient group
 - Reducing conveyances and readmissions

The Team-MDT:

Consultant Geriatrician

ACP

Physician Associate

Specialist Frailty Nurse

Specialist Frailty Physiotherapist

Specialist Frailty Therapists

Frailty Care Co-Ordinator

Pharmacists

Care Navigator

Social Care

Frailty Service

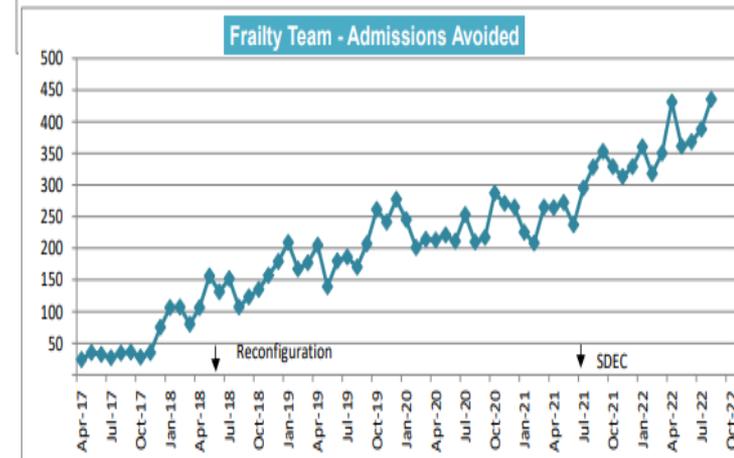
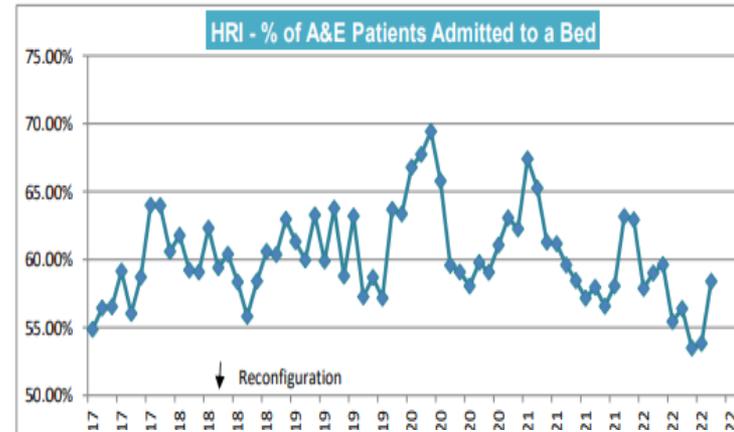
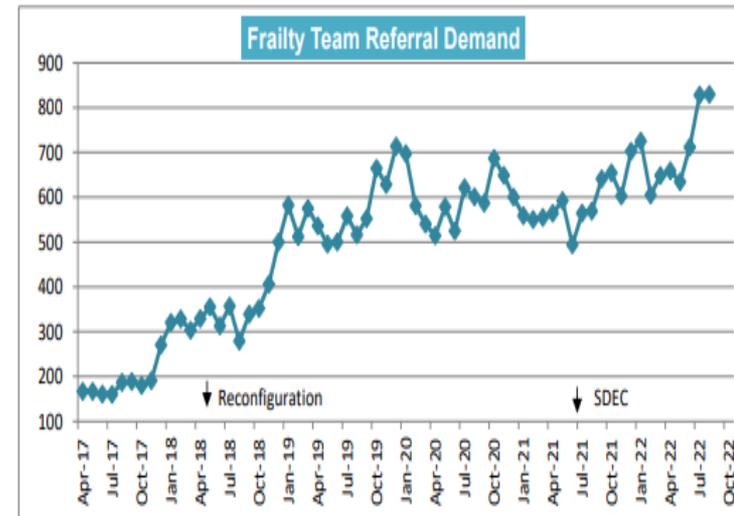
You supported and cared us all through such difficult times from diagnosis until our mum died. Beautiful team

You are all amazing. The care you deliver is outstanding!. You all went above and beyond anything we have ever seen

Outcomes

Going to hospital is usually stressful for my husband who has dementia. This team have changed this experience for us. Cant thank them enough

“Kind and helpful staff and the service exceeded our expectations”.



Urgent Community Response

The Service Aim for the Calderdale and Kirklees UCR is to provide a 0-2 hour response **for all age adults** to accelerate the treatment of urgent care needs closer to home and prevent avoidable hospital admissions.

These 0-2hour and 2 day urgent response standards are part of a range of commitments which aim to help keep people well at home and reduce pressure on hospital services.

In Calderdale and Kirklees the UCR service will supplement other aspects of the Ageing Well programme such as;

- Discharge to assess pathways
- Enhanced Health in Care Homes
- Anticipatory Care
- Frailty Strategy

Virtual Ward – Hospital at Home

- What is a virtual ward and why do we need one?
- Why is this relevant to the UCR service?
- What is our vision going forward?



Next Phase

- Ageing well practitioners and proactive work established
- Develop new pathways
- New roles within these services
- Patient and carer experience is key
- Research

Exciting times ahead for our older and frail population

- Calderdale and Huddersfield Trust in collaboration with community, mental health, social care, voluntary sector, patients and carers will play a key role in using national, linked data and research to develop an outstanding older people and frailty service across acute and secondary setting
- We need to plan ahead and continuously look at the gaps across services when redesigning services

Widening Employment at CHFT

Presented by:

Liam Whitehead
Head of Apprenticeships & Widening
Participation

Widening Employment

Hard to reach communities

Supporting CHFT Colleagues

New progression pathways

Removing barriers

Covid proof interventions

Nationally recognised Volunteering NHSI

Partnership & Collaboration

New ways of working



IMPACT



IMPACT



IMPACT



Apprenticeships



Meet Tom

Tom initially attended one of our Employability Hub "Aspirational Visit to CHFT" after being referred to us by a local Training Provider. We then identified him as a potential "Kickstart" starter but Tom didn't feel ready. We instead recruited him as a Ward Helper Volunteer under our inclusive volunteering project. Whilst volunteering with us he has developed his softer skills to the point where we supported him with a recent nonclinical apprenticeship application and interview. Tom starts his nonclinical Apprenticeship in March 2022

Moving forward.....

- Health Academy / T level pathways (Calderdale / Kirklees College)
- HEE Bid £50K - Volunteering
- Princes Trust Non clinical
- SWAP Catering/ Nonclinical
- Grow the team



OVERALL HEADLINES

Impact

50 x Local young people accessed Apprenticeships / employment outcomes from all pathways

4000+ local people reached with a range of CHFT Employability activities

96% of all activities accessed by those aged 14-30 years old

56% of participants from underrepresented groups

29% of participants disclosed “disadvantage indicators” including long term unemployment

202 x Volunteers supported and **121** recruited since November 2021 with 60% aged 16-24 years

Breaking down barriers to entry – testing new models to recruitment such pre employability workshops, in work mentoring

A collaborative approach with a range of partners

Supported 90 x CHFT unregistered colleagues to access free maths, english upskilling with REALISE

50% of Clinical Apprentices then progress into TNA pathways. Remaining Apprentices continue employment

Financial Report 2021/2022 and External Audit Opinion

Presented by:

Kirsty Archer, *Deputy Director of Finance*

Richard Lee, *KPMG*

2021/22 Financial Performance

	Plan	Actual	
I&E surplus / (deficit)	£0.00m	£0.04m*	●
Cash balance	£38.8m	£54.7m	●
Agency expenditure	£8.8m	£7.6m	●
Use of Resources	2	2	✓
Unqualified External Audit Opinion	✓	✓	✓
Capital investments**	£18.99m	£24.37m	

Key financial performance indicators on target



*Excludes non-cash related year end adjustments for impairments & donated assets (including PPE).

** Additional spend supported by additional external funding

2021/22 Year End Revenue Position

Adjusted financial performance (control total basis):

Deficit for the period	(£0.30m)
Less: impairments *	£0.32m
Less: I&E impact of capital grants and donations	(£0.49m)
Less : net impact DSCH centrally procured inventories	£0.41m
Less : loss recognised on return of donated COVID assets to DHSC	£0.11m
Adjusted surplus	£0.04m

Better than planned break even position



* Impairments are a technical accounting transaction relating to the professionally assessed value of the Trust's land, buildings and equipment.

- In 2021/22 the Trust's land and buildings were revalued.
- This transaction is one-off and excluded from the regulator's measurement of financial performance.

2021/22 Capital

- Actual spend of £24.4m (£27m in 2020/21)
- Key Expenditure:
 - £6.48m on various Information Technology (IT)
 - £5.36m on reconfiguration – HRI A&E
 - £2.27m on MRI scanner
 - £1.48m on the built environment
 - £0.95m on new HRI learning and development centre
 - £0.93m on theatre monitors

2021/22 Capital – Theatre Monitors



2021/22 Capital – New HRI Learning and Development Centre



2021/22 Capital – HRI A&E



2021/22 Capital – HRI A&E



- **Construction on target for completion July 2023**
- **External walls started, with internal fitout shortly behind**

KPMG External Audit 2021/22

Financial Statements

Requirements – Form an opinion on whether the accounts are properly prepared in accordance with accounting standards; and the accounts give a true and fair view of the financial performance and position of the Trust.

Outcome – unqualified opinion in 2021/22

Value for Money

Requirements - Assess whether there are significant weaknesses in the Trust's arrangements for achieving value for money.

Outcome - We did not identify any significant weaknesses with regards to the Trust's arrangements. Commentary provided in our Annual Auditor's Report.

Whole of Government Accounts

Requirements - Confirm that the Trust's submission to NHS Improvement for production of the consolidated NHS provider sector accounts was consistent with the financial statements.

Outcome - unqualified consistency certificate.

KPMG
External
Audit

Annual Report

Requirements - Confirm that the information included within the annual report is consistent with our knowledge of the Trust; all requirements of the Annual Reporting Manual (ARM) have been included; and verify the accuracy of certain remuneration disclosures.

Outcome - We confirmed that the Governance Statement had been prepared in line with the ARM. We did not identify any material inconsistencies with our knowledge of the Trust. We audited (as required) information contained within the remuneration report.

Looking forwards to 2022/23

2022/23 Financial Plan

- Challenging financial year expected – national and operational context
- £17.35m deficit plan, £20m efficiency target
- Part of overall West Yorkshire Integrated Care System breakeven plan
- Significant capital investment £39m (£22m on reconfiguration, including HRI A&E)

Review of 2021/22 and looking forward

Presented by:

Brendan Brown, Chief Executive

Our Trust

- CHFT provides hospital and community health services for around **450,000** people living in **Calderdale** and **Huddersfield**.
- Hospital services are provided at Calderdale Royal Hospital (CRH) and at Huddersfield Royal Infirmary (HRI)
- We provide **community health services** in the Calderdale area (e.g., district nursing, community nursing, sexual health services).
- We employ over **6,300 colleagues** who deliver compassionate care at CRH, HRI, in community health centres and in patients' homes.
- In a typical year we deliver treatment and care for **70,000 inpatients** and **50,000 day-case patients**, **440,000 outpatient** appointments, **175,000 attendances** in the accident and emergency departments, and **550,000 visits in community**
- Our budget for 2021/22 was **£452m**.



CHFT FACTS & FIGURES



Two Hospitals

CALDERDALE ROYAL HOSPITAL & HUDDERSFIELD ROYAL INFIRMARY



6,581
COLLEAGUES



142
VOLUNTEERS



DIGITAL
ASPIRANT
TRUST



200
CONSULTANTS



212
APPRENTICES



1,827
NURSES



1
CULTURE OF
CARE



44
WARDS



1080
ADMIN &
ESTATES



650
BEDS



172,000
A&E PATIENTS



108,000
IN-PATIENTS



439,000
OUT-PATIENTS



4700
TOTAL BIRTHS



322,000
COMMUNITY



212,000
COMMUNITY

Our Vision and Strategy

- Our Vision is : **Together we will deliver outstanding compassionate care to the communities we serve**
- This is underpinned by four 'Pillars' of behaviour that guide how we work to ensure that:
 - We put the patient first
 - We 'go see' (learning from others)
 - We work together to get results
 - We do the must dos (ensuring regulatory and statutory compliance)
- Our aim is to deliver **one culture of care** which means that we care for our colleagues in the same way that we care for our patients - ensuring colleague well-being remains a priority.



Our Long Term Strategy



Transforming
and
improving
patient care



Keeping
the base
safe



A workforce
for the
future



Sustainability

Delivering our long term strategy while recovering from the pandemic and supporting our colleagues

Transforming and improving patient care

- Innovation by nursing staff received **national recognition for the Ascitic Drain Service** (ascitic drains are used to drain excess fluid away from the stomach), winning the British Journal of Nursing Innovation Award
- The first Trust to launch a new **shared maternity electronic patient record system**. The record allows all Trusts across West Yorkshire to share documents relating to care during a woman's pregnancy
- Launched an **exciting new pharmacy pilot service** - 'Pharmacy Led Safari Discharge' offering a safer and quicker way to get prescriptions written and medicines supplied to patients as they are discharged from hospital
- During 2021/22 we were part of the national **Digital Aspirant Programme**, progressing a number of our digital ambitions including scan for safety
- Started the build for our **new A&E at HRI**
- Work by CHS to create a specific Covid isolation ward, at HRI, which opened in December 2020, received three awards at the Building Better Healthcare national awards



Keeping the base safe

- We are tackling the elective backlog of care due to the Covid pandemic.
 - We have **no patients** waiting for **more than 104 weeks** for planned care
 - We have 175 patients waiting over 78 weeks – will be zero by March 2023
 - We have 2000 waiting no more than 52s – target is 2000 by March 2023
 - We are **leading the way on work to narrow inequalities** in waiting lists, including clearing the backlog of 77 people with a learning disability waiting for elective care
- We use **index of multiple deprivation**, ethnicity and other protected characteristics as well as waiting time to **inform our prioritisation of care**
- Our **Macmillan Information and Support Team**, and Lead Cancer Nurse won a national Macmillan Professionals Excellence Award recognising their contribution during the pandemic, offering crucial virtual support to cancer patients
- Our **district nursing team** were one of the first Trusts in the country to offer Covid treatments to clinically vulnerable patients in their own homes
- **Maternity services** submitted evidence against the seven Immediate and Essential Actions of the first Ockenden report published in June 2021. The second national report into maternity was published in March 2022.

Workforce fit for the future



Our Workforce in Detail

	2021/22 Total Number
Medical and dental	677
Ambulance staff	2
Administration and estates	1,080
Healthcare assistants and other support staff	1,827
Nursing, midwifery and health visiting staff	1,790
Scientific, therapeutic and technical staff	769
Total average numbers	6,145

Workforce fit for the future

- Significant challenge during the year - despite this have successfully recruited **nursing and medical workforce** over the last year
- Our estates, facilities and procurement provider, **CHS Ltd named in the Kirklees Top 100 Companies**, in 25th spot, showing continued commitment of all 450 colleagues within CHS
- Our **finance team received Future Focussed Finance Accreditation Level** which recognises organisations with the very best finance skills development, culture, and practices in place
- Celebrated our **first four Professional Nurse Advocates (PNAs)** in Community Division who support the emotional needs of colleagues helping them feel supported and valued
- Associate Director of Nursing, Liz Morley; Clinical Manager, Sally Akesson and District Nurse, Ansah Jami were **individually awarded the Queen's Nurse Award** for a high level of commitment to patient care and nursing practice
- Continued our work with **Project Search - an intensive supported internship programme** for young people with special educational needs to move into paid employment and apprenticeships



Sustainability

- The Trust **2021/22 financial plan** was adapted to reflect the national changes to the NHS financial funding regime during the year
- **Funding was managed within an agreed overall financial envelope** across West Yorkshire – as you have heard from our Director of Finance
- **Developed a Green Plan** recognising the key issues of climate change, air pollution and waste go far beyond the walls of our estate
- Have a **sustainability action plan** - as at March 2022, 74 of the 176 actions were already complete
- **Sustainability is embedded** into upcoming capital projects. Plans for the new Emergency Department at HRI include proposals for an air source heat pump system which would generate renewable energy onsite
- CHS has introduced **low/ultra-low emissions vehicles** into its Transport and Estates fleet.

The support of our local community

The ongoing generosity and support of our local communities has been incredible



Looking forward

We're now into the second half of our financial year and will shortly begin the 2023/24 planning process

Our focus for the rest of this year is:

- Colleague wellbeing and resilience
- Recovery – seeing patients as quickly as possible
- Business as usual alongside any additional Covid-19 waves
- Exciting new developments including:
 - virtual wards;
 - new outpatient referral models;
 - improving access to diagnostic services;
 - more digital technology including the potential use of automation and artificial intelligence;
 - new estate.

Looking forward - Our estates transformation

- A new **learning and development centre** opened at HRI earlier this year
- **Rainbow Child Development Unit** will open in Elland in November
- Opening new community and hospital based diagnostic capacity in Calderdale next year
- The **new Emergency Department at HRI** is well on its way to being built by Autumn 2023
- In 2023 we'll start building work for a **new A&E, wards, operating theatres, learning and development centre and parking** at Calderdale Royal Hospital
- By investing in our buildings we will provide **modern, state of the art facilities** for patients and colleagues

HRI new developments

Learning and Development Centre



New Emergency Department



Rainbow Child Development Unit - Elland



CRH new developments



New multi-storey car park



New Learning and Development Centre



New Emergency Department

New ward block



Questions and Answers

What are you doing to improve recruitment and retention?

- New Recruitment Strategy 2022-25 – Grow Our Own
- Widening access to employment, supporting colleagues to gain key qualifications to progress their career
- Creation of new entry pathways with a variety of community based projects
- Building a pipeline of nursing graduates
- Further expanding our successful international recruitment programmes to focus on key roles
- Developing senior medical colleagues to continue their career at CHFT



How often do you perform staff satisfaction surveys? What were the most recent results?

- Our People Strategy 2022- 2027 presents a clear ambition for CHFT to be an organisation where we care for our colleagues in the same way we care for our patients
- We use several indicators to assess the 'health' of our workforce
- This includes turnover, absence, compliance rates and engagement surveys
- Our most recent People Pulse Survey identifies several areas of improvement and strength when benchmarked with other Trusts
- Our Annual staff survey also identifies areas of strength, notably the Trusts approach to colleague health and wellbeing
- The People Strategy identifies several activities that support our journey to One Culture of Care



How often do either of you go on to a ward/department to observe a busy working environment and speak with your staff?

Brendan Brown, Chief Executive

- Visibility, approachability, and hearing the voices of our colleagues is really important to me
- Out and about on wards, in departments and in community, every day
- Ask Brendan facility whereby anyone across the Trust, can send me a question or comment at any time
- Direct interaction with colleagues at all levels though other things like Charing the Race Equality Network

Helen Hirst, Chair

- Joined the Trust in July 2022
- Meeting different colleagues and seeing different services across the Trust as part of the induction
- Also get the shuttle bus - great opportunity to talk to people who work in different parts of the organisation

Why did you comply with the covid mask and vaccine requirements of the government knowing that this was totally false and the vaccine has resulted in many many deaths and injuries worldwide?

- Followed national policy and guidance on infection prevention and control
- Personal protective equipment is normally used in clinical environments to prevent spread of infection
- Vaccination programmes are offered – personal choice for colleagues
- Strict precautions in place to help ensure the safety of all Covid-19 vaccines



There has been recent publicity given to initiatives aiming to improve hospital food by sourcing food locally and working with local farmers (Sheffield is a leader here). Are there any plans to improve Calderdale and Huddersfield hospitals food in a similar way?

- The team is currently working on a catering strategy which will drive contracts to be delivered using local SME'S (Small/Medium Enterprises).
- We are engaging with local suppliers to establish best routes to market and as part of our Green Plan are working to reduce 'food miles'
- We work closely with National frameworks hubs to complete mini competitions where local SME's are approached.
- We already use local suppliers to source food and are currently engaging with local Cash and Carry's to reduce road miles and are exploring ways to expand this



What can be done for a patient living within the Calderdale area to be automatically offered an out patient appointment at CRH if there is that facility available instead of at HRI. A taxi is approximately £13.00, the shuttle is not available for the general public, and ambulance services can take a long time to collect before and after visit?

- Offer appointments at both hospital sites where possible
- Varies by specialty and clinical need
- Shuttle bus restrictions were for social distancing – now reviewing this
- Remote appointments
- YAS transport options helpline service in Calderdale

How can I get support to help with the cost of travel?
You may be able to claim some or all the costs back from the NHS Healthcare Travel Costs Scheme. To claim your travel costs, take your travel receipts, appointment letter or card, plus proof that you're receiving one of the qualifying benefits, to a nominated cashiers' office.

Have a hospital appointment? NEED TRANSPORT?
CALL 03331 300517
Do you struggle with finding transport to and from your hospital appointments in West Yorkshire?
The Healthcare Transport Options Helpline is a new scheme in West Yorkshire with the aim of connecting people to local transport in their community. Give us a call and see if we can help you get to and from your next hospital appointment.
*Please be aware, the services highlighted by the helpline may charge you for road charges. You may be able to claim some or all of this back from the NHS Healthcare Travel Costs Scheme. Your call handler can provide you with information on how to do this.

Healthcare Transport Options Helpline
03331 300517

Healthcare Transport Options Helpline
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West Yorkshire Health and Care Partnership

In what ways are the Foundation looking to address the issues surrounding access to local clinical services, and at the more coordinated use of existing modern facilities such as Todmorden Health Centre, for residents of the Upper Calder Valley?

- Working with Primary Care Network of GPs
- New services to ensure access and convenient services at home:
 - Urgent Community Response Team
 - First Contact Practitioners
 - Anticipatory Nursing Care
 - Virtual Ward



Where does outpatient physiotherapy fall within the CRH configuration? We work out of a gym. Is there a plan for where we will complete our rehab? Who consulted the community division?

- Started discussing future operating models with service areas to inform the best use of our estate in several years
- This includes developing inpatient and outpatient models, including therapies, and improving patient experience with services offered in community settings
- Colleague involvement is key – happy to meet with therapy colleagues to discuss



A few final words from...

Helen Hirst, *Chair*

Thank you for attending our Annual Members Meeting

**The meeting has
now ended**