



Auditor's Annual Report 2023/24

Calderdale and Huddersfield NHS Foundation Trust

—

28 June 2024

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This report is addressed to Calderdale and Huddersfield NHS Foundation Trust (the Trust). We take no responsibility to any member of staff acting in their individual capacities, or to third parties.

External auditors do not act as a substitute for the audited body's own responsibility for putting in place proper arrangements to ensure that public business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively.



01 Executive Summary

Executive Summary

Purpose of the Auditor’s Annual Report

This Auditor’s Annual Report provides a summary of the findings and key issues arising from our 2023-24 audit of Calderdale and Huddersfield NHS Foundation Trust (the ‘Trust’). This report has been prepared in line with the requirements set out in the Code of Audit Practice published by the National Audit Office and is required to be published by the Trust alongside the annual report and accounts.

Our responsibilities

The statutory responsibilities and powers of appointed auditors are set out in the Local Audit and Accountability Act 2014. In line with this we provide conclusions on the following matters:



Accounts - We provide an opinion as to whether the accounts give a true and fair view of the financial position of the Trust and of its income and expenditure during the year. We confirm whether the accounts have been prepared in line with the Group Accounting Manual prepared by the Department of Health and Social Care (DHSC).



Annual Report - We assess whether the Annual Report is consistent with our knowledge of the Trust. We perform testing of certain figures labelled in the remuneration report.



Value for money - We assess the arrangements in place for securing economy, efficiency and effectiveness (value for money) in the Trust’s use of resources and provide a summary of our findings in the commentary in this report. We are required to report if we have identified any significant weaknesses as a result of this work.



Other reporting - We may issue other reports where we determine that this is necessary in the public interest under the Local Audit and Accountability Act.

Findings

We have set out below a summary of the conclusions that we provided in respect of our responsibilities:

Accounts	<p>We issued an unqualified opinion on the Trust’s accounts on 28 June 2024. This means that we believe the accounts give a true and fair view of the financial performance and position of the Trust and Group.</p> <p>We have provided further details of the key risks we identified and our response on pages 6-8.</p>
Annual report	<p>We did not identify any significant inconsistencies between the content of the annual report and our knowledge of the Trust.</p> <p>We confirmed that the Governance Statement had been prepared in line with the Department of Health and Social Care requirements.</p>
Value for money	<p>We are required to report if we identify any matters that indicate the Trust does not have sufficient arrangements to achieve value for money.</p> <p>We have nothing to report in this regard</p>
Other reporting	<p>We did not consider it necessary to issue any other reports in the public interest.</p>



02 Audit of the Financial Statements

Audit of the financial statements

KPMG provides an independent opinion on whether the Trust's financial statements:

- Give a true and fair view of the state of the Trust's affairs as at 31 March 2024 and of its income and expenditure for the year then ended;
- Have been properly prepared in accordance with the accounting policies directed by NHS England with the consent of the Secretary of State as being relevant to NHS Foundation Trusts and included in the Department of Health and Social Care Group Accounting Manual 2023/24; and
- Have been prepared in accordance with the requirements of the National Health Service Act 2006 (as amended).

We conducted our audit in accordance with International Standards on Auditing (UK) ("ISAs (UK)") and applicable law. We have fulfilled our ethical responsibilities under, and are independent of the Trust in accordance with, UK ethical requirements including the FRC Ethical Standard. We believe that the audit evidence we have obtained is a sufficient and appropriate basis for our opinion.

Audit opinion on the financial statements

We plan to issue an unqualified opinion on the Trust's financial statements before 28 June 2024 mid day deadline.

The full opinion is included in the Trust's Annual Report and Accounts for 2023/24 which can be obtained from the Trust's website.

Further information on our audit of the financial statements is set out overleaf.

Audit of the financial statements

The table below summarises the key risks that we identified to our audit opinion as part of our risk assessment and how we responded to these through our audit.

Risk	Procedures undertaken	Findings
<p>Valuation of land and buildings The carrying value of Land and Buildings include a valuation that is estimated. An estimated valuation inherently has a significant risk of error due to the nature of the estimate including a number of assumptions being used.</p>	<ul style="list-style-type: none"> – We critically assessed the independence, objectivity and expertise of Cushman and Wakefield, the valuers used in developing the valuation of the Trust’s properties at 31 March 2024; – We inspected the instructions issued to the valuers for the valuation of land and buildings and verified they are appropriate to produce a valuation consistent with the requirements of the Group Accounting Manual; – We evaluated the design and implementation of controls in place for management to review the valuation and the appropriateness of assumptions used; – We challenged the appropriateness of the valuation and classification of the Accident and Emergency development at 31 March 2024; – We challenged key assumptions within the valuations; and – We performed inquiries of the valuers in order to verify the methodology that was used in preparing the valuation and whether it was consistent with the requirements of the RICS Red Book and the GAM. These inquiries verified that the methodology was consistent with the requirements of the RICS Red Book and the GAM. 	<p>We did not identify any material misstatements relating to this risk.</p> <p>We did not raise any recommendations relating to this risk.</p> <p>We considered the estimate to be balanced based on the procedures performed.</p>

Audit of the financial statements

The table below summarises the key risks that we identified to our audit opinion as part of our risk assessment and how we responded to these through our audit.

Risk	Procedures undertaken	Findings
<p>Fraudulent expenditure recognition - completeness Auditing standards suggest for public sector entities a rebuttable assumption that there is a risk that expenditure is recognised inappropriately.</p> <p>The commitment to a financial plan can create an incentive for management to understand the level of relevant expenditure compared to that which has been incurred.</p> <p>We consider this would be most likely to occur through understating non-NHS expenditure, via understating manual non-NHS accruals, in order to push back expenditure into 2024-25 to mitigate financial pressures.</p>	<ul style="list-style-type: none"> - We evaluated the design and implementation of controls for identifying and developing manual non-NHS expenditure accruals, including those controls for ensuring the cut-off of non-NHS expenditure is correct, to ensure it is captured in the correct financial year; - We inspected a sample of relevant non-NHS Expenditure and related bank transactions, which occurred in April 2024, in order to determine whether expenditure has been recognised in the correct accounting period; - We inspected journals posted as part of the year end close procedures that adjust relevant non-NHS expenditure via the non-NHS accruals General ledger codes in order to critically assess whether there is an appropriate basis for posting the journals and the values can be agreed to supporting evidence; and - We compared the items that were accrued at 31 March 2023 to those accrued at 31 March 2024 in order to risk assess whether any items of expenditure accrued for in the 2022-23 financial year have been excluded from the 2023-24 financial statements inappropriately. A sample of movements were selected and in all cases supporting evidence was provided to evidence that movements were appropriate. 	<p>We did not identify any material misstatements relating to this risk.</p> <p>We did not raise any recommendations relating to this risk.</p>

Audit of the financial statements

The table below summarises the key risks that we identified to our audit opinion as part of our risk assessment and how we responded to these through our audit.

Risk	Procedures undertaken	Findings
<p>Management override of controls We are required by auditing standards to recognise the risk that management may use their authority to override the usual control environment.</p>	<ul style="list-style-type: none"> • We evaluated the design and implementation of Journal Review controls; • We evaluated the preparation of key accounting estimates, including the consideration of the valuation of land and buildings for indicators of management bias; • We planned to assess the business rationale and the appropriateness of the accounting for significant transactions that are outside the component’s normal course of business, or are otherwise unusual, however we did not identify any such significant unusual transactions; • We analysed all journals through the year to identify journals displaying high risk characteristics. We followed-up each of these journals in order to assess the appropriateness and accuracy of the transactions posted; and • We tested the completeness of the related parties identified and assessed whether relevant transactions had been appropriately disclosed within the financial statements. 	<p>We did not identify any material misstatements relating to this risk.</p> <p>We did not raise any recommendations relating to this risk.</p>

03 Value for Money

Value for Money

Introduction

We are required to consider whether the Trust has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources or 'value for money'. We consider whether there are sufficient arrangements in place for the Trust for the following criteria, as defined by the National Audit Office (NAO) in their Code of Audit Practice:



Financial sustainability: How the Trust plans and manages its resources to ensure it can continue to deliver its services.



Governance: How the Trust ensures that it makes informed decisions and properly manages its risks.



Improving economy, efficiency and effectiveness: How the Trust uses information about its costs and performance to improve the way it manages and delivers its services

Approach

We undertake risk assessment procedures in order to assess whether there are any risks that value for money is not being achieved. This is prepared by considering the findings from other regulators and auditors, records from the organisation and performing procedures to assess the design of key systems at the organisation that give assurance over value for money.

Where a significant risk is identified we perform further procedures in order to consider whether there are significant weaknesses in the processes in place to achieve value for money.

We are required to report a summary of the work undertaken and the conclusions reached against each of the aforementioned reporting criteria in this Auditor's Annual Report. We do this as part of our commentary on VFM arrangements over the following pages.

We also make recommendations where we identify weaknesses in arrangements or other matters that require attention from the Trust.

Summary of findings

	Financial sustainability	Governance	Improving economy, efficiency and effectiveness
Commentary page reference	13-15	16-17	18-19
Identified risks of significant weakness?	■ Yes	■ No	■ No
Actual significant weakness identified?	■ No	■ No	■ No
2022-23 Findings	No significant weakness identified	No significant weakness identified	No significant weakness identified
Direction of travel	↔	↔	↔

Value for Money

NATIONAL CONTEXT

Financial performance

The 2023-24 financial year saw a significant increase in the level of financial pressures facing the NHS sector. This followed the end of Covid-19 related financing arrangements. The sector has faced cost pressures from a range of factors, most significantly the impacts of inflation felt during the year and the costs of industrial action.

At the end of January 2024 NHS England forecast that the NHS would record an overspend of £1.1bn against its agreed budgets. This came after additional funding had been made available earlier in the year to support with the costs of industrial action.

Operational performance

In January 2023 the Government announced five pledges for 2023, including reducing NHS waiting lists and the time people wait for procedures. Waiting lists had grown significantly during the Covid-19 pandemic as elective activity was postponed in order to prioritise the treatment of Covid patients and ensure safe working.

According to the Health Foundation the NHS waiting list had grown from 6.2 million patients at the beginning of 2022 to 7.2 million in January 2023. There had also been a significant increase in the number of patients with long waits. At the end of 2023 there remained 355,000 patients that had been waiting over a year for treatment. Income arrangements for the acute sector were revised in year to reimburse providers for elective activity based on the actual number of patients treated.

System working

The Health and Care Act 2022 formally established integrated care systems (ICSs), 42 partnerships within local geographies to promote closer working between the organisations responsible for healthcare delivery. Integrated Care Boards were formed on 1 July 2022, taking over commissioning responsibility from Clinical Commissioning Groups.

In their first full year of operation ICSs have continued to work to develop and embed governance arrangements both within the ICBs themselves and as systems.

LOCAL CONTEXT

Background

Calderdale and Huddersfield NHS Foundation Trust is an integrated Trust providing acute and community health services. The Trust serves a diverse population across two places: the Kirklees area served by the Trust, which has a population of 245,000 people; and Calderdale with a population of 220,000 people. The Trust operates acute services from two main hospitals, Huddersfield Royal Infirmary and Calderdale Royal Hospital. It also provides a range of community healthcare services in Calderdale. The Trust provides a range of services including urgent and emergency care; medical; surgical; maternity; gynaecology; critical care; children's and young people's services; end of life care and outpatient and diagnostic imaging services.

Financial performance

The Trust is one of the NHS Providers which forms part of the West Yorkshire Integrated Care System.

In 2023/24, the Trust reported a deficit of £13.2m which was a £7.6m favourable variance against the agreed deficit budget of £20.8m, set at the outset of the 2023/24 financial year.

For 2024/25, the Trust has submitted a deficit plan of £26.3m, with a savings target of £32.2m.

Operational performance

The Trust has continued to perform well in its key metrics during 2023/24 despite unprecedented levels of attendances at both emergency departments at various times throughout the year. Cancer performance has improved throughout the year and has been recognised nationally in the media. From April 2023 to February 2024, month on month, CHFT was the best performing acute Trust (out of 119) in England for Cancer 62-day referral to treatment for 8 out of 11 months (second best in the other three months). Although the Trust missed the Emergency Care 4-hour standard (ECS) during 2023/24, it has benchmarked well nationally. Total patients waiting 40 weeks and 52 weeks to start treatment have fallen significantly during 2023-24, with a decrease of 50% in 40 weeks waiting and a 90% fall in 52 weeks waits between April 23 and March 24.

System working

The Trust is a member of the West Yorkshire ICS which demonstrates that they are participating and contributing into integrated care system plans. The Trust is involved in a number of local strategic partnerships including wellbeing boards for both Calderdale and Kirklees. The Trust Director of Finance is the lead for Kirklees Place and the Trust Director of Transformation and Partnerships is a member of the Calderdale Place. Other senior management are involved in the West Yorkshire Association of Acute Trusts, and the West Yorkshire Community Collaborative. The Trust is exploring system wide solutions to the elective recovery plans.

Financial Sustainability

How the Trust plans and manages its resources to ensure it can continue to deliver its services.

We have considered the following in our work

- The processes for setting the 2023/24 financial plan to ensure that it is achievable and based on realistic assumptions;
- How the 2023/24 efficiency plan was developed and monitoring of delivery against the requirements;
- Processes for ensuring consistency between the financial plan set for 2023/24 and the workforce and operational plans;
- The process for assessing risks to financial sustainability;
- Processes in place for managing identified financial sustainability risks; and
- Performance for the year today against the financial plan.

Summary of Findings

- The Trust developed its financial plan for 2023/24 based on its assessed needs and resources, but also in the context of working within the West Yorkshire Integrated Care System (WYICS). The process for setting its financial plan followed the national timetable via the development and adherence to the Trust's own internal timetable of events and deadlines.
- The process for setting the 2023/24 financial plan began in October 2022 and was approved by the Trust Board in March 2023 before its initial submission to the WYICS later in the same month. As part of the process, portfolio budgets and savings plans, which fed into the production of the financial plan, were agreed by budget holders and relevant business cases were agreed by the Business Case Approvals Group. The development of the plan involved both internal and external stakeholders and followed a documented set of national and local planning principals to allow for the budget to be based on realistic and achievable assumptions.
- As part of the 2023/24 financial planning process, and during the course of the 2023/24 financial year, the Trust developed a Cost Improvement Plan (CIP) of £31.5m. The Trust delivered £27.3m of its expected savings target, of which £13.2m were non-recurrent savings. The achievement of the CIP has been reported and monitored through the Finance and Performance Committee, on a regular and timely basis throughout the course of the financial year, as an integral part of the financial reporting of the Trust's agreed deficit position. The CIP was developed by the portfolio teams from a checklist of potential efficiencies identified from the use of Benchmarking activity.
- The Trust has created an integrated financial plan which builds upon the Trust's annual budget which has been developed from their portfolio financial plans mentioned above. Changes to the integrated financial plan need formal approval, either via a business case for development and/or inflationary increases, or approval of a fully worked up CIP which has been approved by the Portfolio Team. This approach helps to ensure that operational and workforce plans are financially aligned.
- Upon receipt of the Trust's initial financial plan submission, the WYICS assessed the overall financial position of the ICS, before requiring that further submissions from the bodies within the ICS be submitted. A final submission by the Trust was made in April 2023 which showed a £20.8m deficit budget for the 2023/24 financial year for the Trust. This budget was agreed by the WYICS in the overall context of the WYICS budgeting for financial balance for the 2023/24 financial year.
- With a deficit plan being agreed between the WYICS and the Trust, NHSE carried out a review of the overall process for the 2023/24 planning cycle at the Trust. The review confirmed that for the 2023/24 planning cycle the Trust worked collaboratively with the ICB, NEY Region and place leads in Calderdale and Kirklees to budget for and control costs and to identify and plan for efficiency measures. As a result of this review, NHSE also outlined the need for the Trust to implement a number of actions to ensure that they can, over the medium term, return to recurrent balance before the long term transformational change programme is fully implemented.
- The Trust responded to the NHSE required actions by creating a detailed action plan which involved allocating the actions to responsible parties/individuals/the Trust and/or partners and setting a delivery timescale. These included both short and medium term actions as necessary, for the Trust to, over the medium term, return to recurrent balance before the long term transformational change programme is fully implemented.

Financial Sustainability

Summary of Findings (cont)

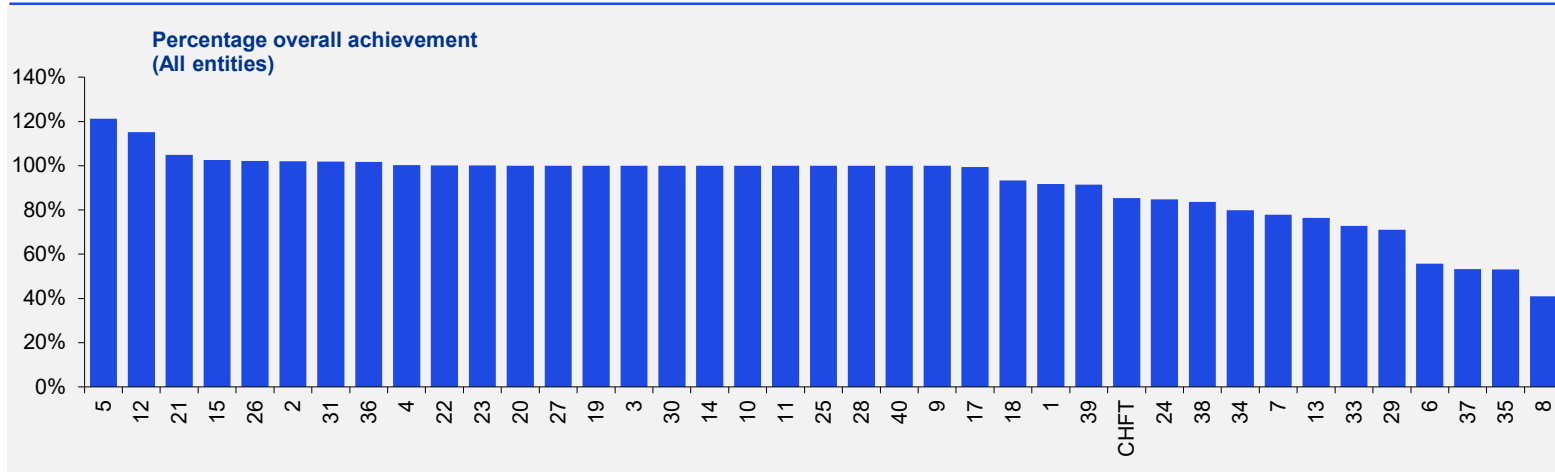
- In year, the Trust has also introduced into its governance structure a 'Turnaround Executive' that reports directly to the Finance and Performance Committee, This purpose of the body is to be accountable for the development, implementation and monitoring of the Trust's 'Turnaround Programme' to deliver financial sustainability. The Turnaround Executive Group reviews the delivery of the action plan created after the NHSE review, and this is then formally reported through the Finance and Performance Committee.
- Risks to the delivery of the financial plan and financial sustainability are identified, assessed and managed by the Executive Directors and are reported through the Risk Register and Board Assurance Framework (BAF), through to Finance and Performance Committee, the Audit and Risk Committee and the Board of Directors in line with the Trusts 'Risk Management Framework';
- The Trust monitors performance against budget at a number of levels, including at budget holder, Executive Management Team, Finance and Performance Committee and at the Board of Directors level. At each level there are actions and escalation processes in place to raise variances up to the appropriate level to allow appropriate decisions to be made.
- By 31 March 2024, the Trust reported a deficit in its Annual Report of £13.2m. This was a favourable improvement of £7.6m against the original £20.8m deficit plan. This was achieved by making additional non-recurrent savings and the receipt of additional income received from the NHS system.
- In early 2024 the Trust has participated in the 2024-25 financial planning round and has submitted financial plans to the ICB in line with national and regional guidance. The agreed financial plan for 2024/25 is a deficit plan of £26.3m with a savings target of £32.2m. Of the savings target, £20.2m has been identified as recurrent savings and £12m as non-recurrent.
- The graphs on page 15 have been included to illustrate key financial performance that the Trust has attained during 2023/24. The graphs show the Trust's attainment against all KPMG audited providers. All entities apart from Calderdale and Huddersfield NHS Foundation Trust have been anonymised in the graphs.

Overall Conclusion:

Based on the findings from the procedures we have carried out we have not identified any significant weaknesses in the Trust's arrangements associated with financial sustainability.

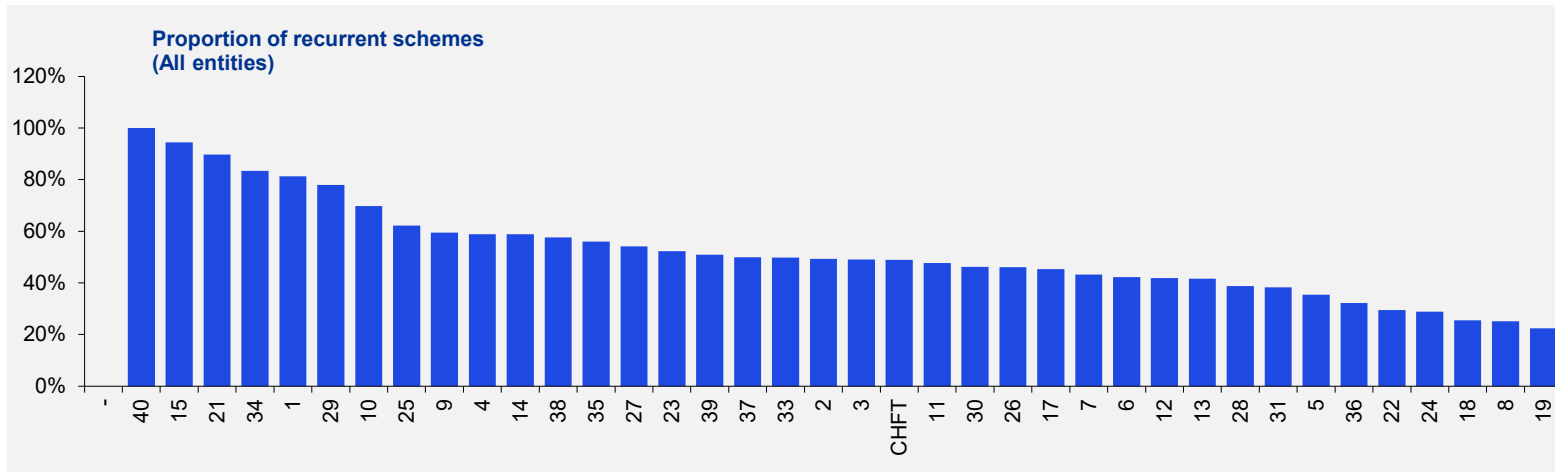
Key financial and performance metrics:	2023-24	2022-23
Planned surplus/(deficit) for the year	£(20.8m)	£(17.4m)
Actual surplus/(deficit) for the year	£(13.2m)	£(17.3m)
Planned CIP as a % of savings		
- Recurrent	60.32%	37.98%
- Non-recurrent	39.68%	62.02%
Actual CIP as a % of savings		
- Recurrent	51.65%	21.15%
- Non-recurrent	48.35%	78.85%
Year-end cash position	£27.2m	£24.6m

Achievement of overall savings plans



The above comparison is showing how the Trust compares across NHS providers audited by KPMG and the percentage of savings achieved in year against the initial plan.

Percentage of savings which are recurrent



The above comparison is showing how the Trust compares across NHS providers audited by KPMG and the percentage of savings made in year that are recurrent.

Governance

How the Trust ensures that it makes informed decisions and properly manages its risks.

We have considered the following in our work:

- Processes for the identification, monitoring and management of risk;
- Controls in place to prevent and detect fraud;
- The review and approval of the 2023/24 financial plan by the Board, including how financial risks were communicated;
- Processes for monitoring performance against budgets and taking actions in response to adverse variances;
- How compliance with laws and regulations is monitored;
- Processes in place to monitor officer compliance with expected standards of behaviour, including recording of interests, gifts and hospitality; and
- How the Board ensures decisions receive appropriate scrutiny.

Summary of Findings

- The Trust has a well established BAF which identifies the strategic risks to delivery of the Trust's key strategic priorities. The BAF includes an understanding of the controls that are in place to address and mitigate said risks, as well as any gaps in assurance and the agreed action plan in place to mitigate these risks to an agreed acceptable level of risk. The BAF incorporates processes and procedures required by the Trust's Risk Management Framework and associated policies to identify, assess, monitor and report on the risks the Trust faces in delivering its key priorities.
- The Trust has in place a 'Counter Fraud, Bribery and Corruption Policy'. The Trust also commissions a Local Counter Fraud Specialist (LCFS) as part of its Internal Audit provision. The ARC receives the Local Counter Fraud workplan each year, supported by regular progress reports on the delivery of the plan and also information on actual fraud investigations that have been carried out or are ongoing. These reports are supported by additional national briefings that are shared with the Trust via the LCFS.
- The 2023/24 financial plan was agreed through an iterative process over a number of months. Finance and Performance Committee oversaw the production of the budget, with the input of relevant and appropriate internal and external stakeholders. The financial plan was approved by the Trust Board in March 2023 before initial submission to the WYICS later the same month. Further updates were required before the final budget was agreed at an ICS level, all of which were delivered and approved in line with the relevant local and national processes and procedures.
- Financial risks are identified in the BAF and are communicated to Trust Board and Audit and Risk Committee as part of the Trust's ongoing internal control and assurance processes. Financial risks are also communicated to Finance and Performance Committee as part of the regular reporting of the Trust's 'Integrated Performance Report'.
- The Trust monitors performance against budget at a number of levels, including at budget holder, Executive Management Team, Finance and Performance Committee and at the Board of Directors level. At each level there are actions and escalation processes in place to raise variances up to the appropriate level to allow appropriate decisions to be made.
- The Trust monitors its compliance with laws and regulations on an ongoing basis throughout the year, gaining assurance through commissioned internal audits,. The Trust's Governance lead also co-ordinates and monitors compliance with the applicable legislation and regulatory standards. The ARC also receives a compliance report each year setting out relevant compliance matters.

Governance

Summary of findings (cont)

- The Trust has a suite of Human Resources policies setting out expectations, all of which are available to employees via the Trust’s intranet, together with a Group policy on ‘Conflicts of Interests and Standards of Business Conduct’ which is regularly reviewed. This includes the Trust’s policy on gifts and hospitality and sets out clear expectations and the process for obtaining declarations of interest. The ARC is responsible for monitoring Trust compliance with the declarations of interest by receipt of a declarations of interest report at least annually.
- Key Strategic decisions are discussed in several forums prior to submission to the Trust Board for approval. These include the weekly Executive Board, the Business Case Approval Group, the Turnaround Executive and the formal sub-committees of the Trust Board. At each stage decision making is fully supported by the Trust’s ‘Standing Financial Instructions’ and related procurement policies. These include the hierarchy of delegation of approval of expenditure as well as the associated Terms of Reference for the sub-committees and Trust Board.

Overall Conclusion

Based on the findings from the procedures we have carried out we have not identified any significant weaknesses in the Trust’s arrangements associated with Governance.

	2024	2023
Control deficiencies reported in the Annual Governance Statement	None	None
Head of Internal Audit Opinion	Significant	Significant
Oversight Framework segmentation	Three	Three
Care Quality Commission rating	Good	Good

Improving economy, efficiency and effectiveness

How the Trust uses information about its costs and performance to improve the way it manages and delivers its services

We have considered the following in our work:

- The processes in place for assessing the level of value for money being achieved and where there are opportunities for these to be improved;
- How the performance of services is monitored and actions identified in response to areas of poor performance;
- How the Trust has engaged with ICS partners in development of the organisation and system wide plans and arrangements;
- The engagement with wider partnerships and how the performance of those partnerships is monitored and reported; and
- The monitoring of outsourced services to verify that they are delivering expected standards.

Summary of findings

- The Trust has set out its arrangements to achieve value for money through its Governance structure, supported by a set of policies and procedures, including, 'Standing Financial Instructions', related procurement policies and procedures, business cases and Equalities and Impact Assessments.
- The decision making structure is laid out in the 'Standing Financial Instructions' for each financial level. This includes the Trust Board of Directors and the Trust's committee structure which is governed by individual and specific Terms of References. Decisions are supported by the business case requirement, procurement policies, and Equalities and Impact assessments.
- Performance of services is monitored through the 'Integrated Performance Report', which reports on over 100 performance indicators (PI's), including relevant Care Quality Commission (CQC) requirements. This is taken and scrutinised and challenged initially at the Finance and Performance Committee before being escalated to the Trust's Board of Directors for further consideration.
- A red, amber, green (RAG) rating is allocated to all PI's within the 'Integrated Performance Report', highlighting where improved performance is required. Audits are performed over key PI's including deep dives, where the Finance and Performance Committee members feel necessary, with the results of said audits being reported to the Data Quality Board, the Finance and Performance Committee and the Board of Directors.
- The Trust is an active member of the WYICS, the local Calderdale and Kirklees Health and Wellbeing Boards and the overall West Yorkshire Health and Care Partnership. A deep dive of the arrangements was carried out by the Deputy Chief Executive in January 2024 and has concluded that the arrangements for participation and engagement with the partners are now embedded. This deep dive was taken through Audit and Risk Committee for assurance that actions are being and have been embedded.
- The Trust is also a member of the West Yorkshire Community Collaborative, the Kirklees Health and Care Partnership, and the Calderdale Cares Partnership at a strategic level. Updates of the activities and performance of these partnerships are reported direct by the Board representatives to the Board or relevant sub committees of the Board.
- The Trust is involved in a number of significant formal contractual partnerships (e.g. the Health informatics service, Calderdale and Huddersfield Solutions Limited, those relating to the Trust's PFI arrangements and Pennine Property Partnership). The Trust monitors and reports performance of said contracts through the formal governance meetings as required as part of the Trust's governance structure.

Improving economy, efficiency and effectiveness

Summary of findings (cont)

- The Trust outsources its facilities management services to its own fully owned subsidiary, CHS. A regular joint Trust and CHS liaison meeting forms part of the formal governance arrangements within the Trust. The joint meeting is in place to oversee the delivery of the contract at Huddersfield Royal Infirmary and monitors the performance through the KPI's agreed in the contract, with any issues that need escalating being formally reported to the Finance and Performance Committee.
- The Trust has a PFI contractor in relation to the facilities management of the Calderdale Hospital site. There is a formal contract meeting monthly, which monitors performance against the contractual requirements. Interventions are identified and followed up should these be necessary as part of the formal monthly meetings, and where necessary issues are escalated to the Finance and Performance Committee.

Overall Conclusion:

Based on the findings from the procedures we have carried out we have not identified any significant weaknesses in the Trust's arrangements associated with improving economy, efficiency and effectiveness.



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