

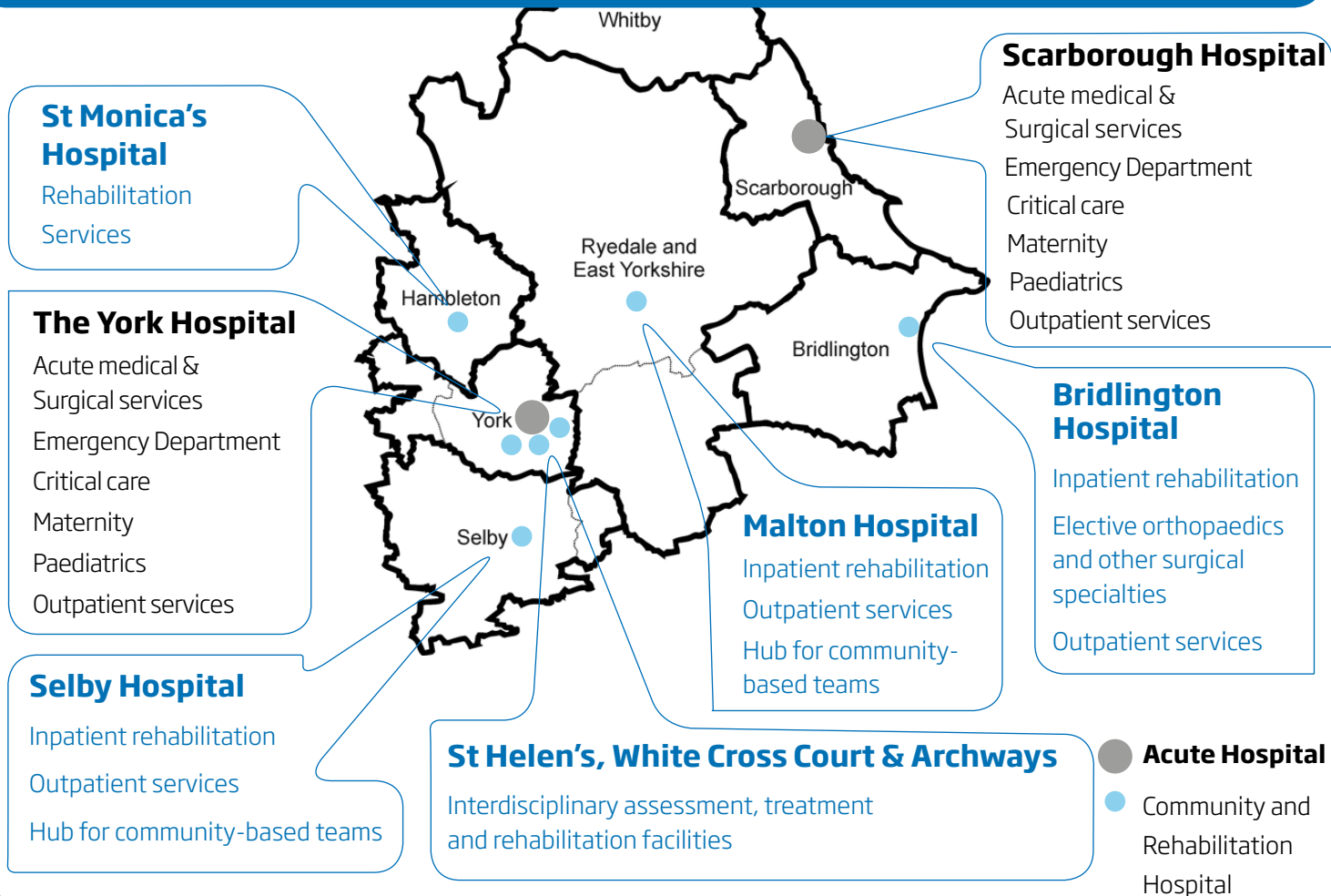


Our Year Annual Review 2015/16

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

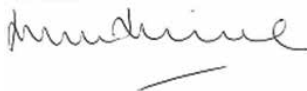
Our annual turnover is approaching **£0.5bn**. We manage **nine** hospital sites and have a workforce of **8,500** staff working across our hospitals and in the community.



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Chair's welcome



Susan Symington
Chair

I am pleased and proud to welcome you to this year's annual review of York Teaching Hospital NHS Foundation Trust.

At the heart of everything we do in our Trust, across all of our sites, from the chair and chief executive to the most junior members of our staff, we share four over-riding values.

- **We are caring about what we do**
- **We respect and value each other**
- **We listen in order to improve**
- **We always do what we can to be helpful**

These important values have provided us with clear guidance over the course of 2015-16 about our behaviours and what we can expect from each other, about how we treat those people that we serve and how we work with our partners and stakeholders. However challenging the environment in which

we work, these values are a constant touchstone. They have reminded us that we are here to serve each other, our patients and service users and our wider stakeholder and partnership community.

As I conclude the first year of chairing our Trust, I know that the NHS faces significant challenges in the year ahead, reflected by those faced by our Trust, which will require hard work and dedication to overcome. Our consistent mission to be a valued and trusted partner within our care system delivering safe effective care to the population we serve, is exactly the right guiding mission.

Our ambitions for the five years ahead are clearly focussed and we will seek to

- provide the highest standards of care within our resources
- deliver safe and effective healthcare with our partners
- recruit, retain and develop the very best staff
- ensure we provide the best possible environment, fit for the future

“ I know that the NHS faces significant challenges in the year ahead, reflected by those faced by our Trust, which will require hard work and dedication to overcome ”

Our ambitions for the year ahead reveal our commitment to providing sustainable health services for the communities we serve, our sense of pride in our Trust and its future and our heartfelt commitment to our enduring values.

Above all of this must go my thanks to all of our staff and partners across our community who have worked together in these difficult times to ensure our patients remain at the heart of everything we do.



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, both in terms of a reduction in resources and an increasing expectation regarding performance.

In October we received our CQC report, some six months after the inspection visit, with an overall rating for the Trust of 'requires improvement'. Three quarters of our ratings in the reports were 'good', and no areas were rated as 'inadequate'.

At the Quality Summit, where our reports were presented for the first time, it was acknowledged that we were on the margins of a rating of 'good' overall. Given the inspection took place only two and a half years after the merger between York and Scarborough Trusts, this is an outstanding achievement, and it is rewarding to see the progress that has been made on the East Coast, and particularly at Scarborough Hospital.

The reports, without exception, rated our services as 'good' for being caring, and every single one of our staff should be proud of the CQC's comments regarding their compassion and dedication. It



**Patrick
Crowley**

was great to see such positive reports on our community services only three years since they transferred to the Trust. It is a phenomenal achievement in such a short time to find these services rated as 'good' across the board.

As an overall assessment, a single rating for the whole organisation clearly cannot reflect the range of our services or the complexity of our organisation, nor can it give a detailed insight into the quality of the services we provide. Our rating was largely derived from issues around staffing, specifically our over-reliance on agency staffing as recruitment, particularly on the East Coast, remains difficult.

Nonetheless, with any comprehensive review of our services, there will be areas where improvements need

to be made, and these have either been completely addressed since the inspection, or have seen significant improvements made against them.

The financial pressure facing the provider sector has increased, with most organisations reporting a deficit. The 2014-15 year was the first in our history where, despite our best efforts and continuing achievement of our efficiency targets, we reported a year-end deficit. It is therefore no surprise that our financial plans for 2015-16 predicted a deficit, and this was a picture that was reflected up and down the country.

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 services, due to growth in demand and a difficult economic environment. These are beginning to see improvement, and by the end of the financial year we had achieved all of our cancer access targets, however, we must now ensure that these improvements can be sustained.

The landscape is changing and we are moving into an era where transformation is essential. It is no longer enough to focus

on our own organisation and our patients, we must think more widely as a whole system, with a far greater emphasis on partnership and alliances. There is now a national requirement for us to plan on that basis, and these developments are having an impact on how we work with our partners in health and social care.

NHS England released guidance asking for five year 'place based' plans, called Sustainability and Transformation Plans (STPs). All partner organisations (Clinical Commissioning Groups, Local Authorities and NHS Trusts) must work together to develop these plans which must be finalised by the summer of 2016. These plans will then set the framework against which we must design and deliver services in the coming years.

Importantly, as part of this work, we are also working on Ambition for Health, a five year programme across Scarborough, Bridlington, Filey and Ryedale that is designed to drive innovation across health and social care through collaboration. The programme covers three main aspects of health and social care:

- An ambition to help people lead healthy lifestyles, supporting them to take control of their own health and prevent illness
- An ambition to improve the care provided at home and in the community so that health

and social care services work more closely together with the aim of preventing people from needing treatment in hospital

- An ambition to ensure that our hospitals and other major services are high quality and financially sustainable

There are clearly several challenges for our local health economy, including an ageing population, pressure on finances and a difficult jobs market.

These issues are of particular significance on the East Coast, and are the same issues that shaped our ambitions at the time of the merger between York and Scarborough Trusts.

When planning the merger, we set out our aims for a safe and sustainable future for Scarborough and Bridlington Hospitals, in particular our commitment to maintaining core services.

There have already been successes. We have maintained part of our stroke pathway in Scarborough at a time when many hospitals are losing theirs in line with a national trend towards centralisation. We are now delivering the eye injection service for age-related macular degeneration on the East Coast, when patients previously had to travel to York, and we have also successfully established our elective orthopaedic service at Bridlington Hospital.

Scarborough and Bridlington Hospitals continue to play a vital role and are a key element of our strategic plans for the organisation.

Ambition for Health will build on this with a key objective to the develop services that have a sustainable future. Partnership working is essential if we are to make real and lasting change, but it is equally important that we continue to meet our own obligations in terms of performance and finance.

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. Nationally there continues to be a shortage of staff in certain specialties, and we are not immune to the effects of this. Nonetheless, our recruitment approach has meant that we have been able to recruit record numbers of newly qualified nurses as well as a number of staff from the EU. Being able to welcome these staff into the organisation will help us to develop a stable workforce and reduce our reliance on agency and temporary staff. I have no doubt that the year ahead will continue to challenge us, but the change in approach to partnership working and the commitment of our staff will ensure that we can meet this challenge.





Trust holds inaugural Patient Safety Conference

Over 280 staff, from all roles and responsibilities across the Trust attended the inaugural Patient Safety Conference.

The conference, 'Patient Safety: The Next Frontier', took place at York Racecourse on Friday 22 May.

Chaired by the Trust's Medical Director Alastair Turnbull and Chief Executive Patrick Crowley, the day was planned to coincide with the Trust's clinical governance day to give as many staff as possible the opportunity to attend.

Transport was arranged for Scarborough-based staff and over 280 staff from all roles and occupations across the Trust attended.

The day's agenda featured both internal and external speakers including Professor Brian Toft from the University of Coventry.

Alastair Turnbull, Medical Director, said: "Sign up to Safety is a national patient safety campaign. Launched in June 2014 its mission is to strengthen patient safety in the NHS and make it the safest healthcare system in the world.

"Organisations who Sign up to Safety commit to strengthen patient safety by setting out the actions they will undertake in response to five Sign up to Safety pledges, one of which is learning and listening.

"This event gave us the opportunity to listen and learn. It gave our staff, who work in all different roles, the opportunity to hear about the fantastic work that is taking place to improve patient safety as well as what we need to



Dr Alastair Turnbull (front centre) with speakers at the Trust's inaugural Patient Safety Conference held at York Racecourse

do in the future to continue to reduce harm for our patients."

Staff displayed posters at the event showcasing their work and improvements in patient safety and awards were made for work in the following areas, falls prevention, paediatrics and deteriorating patients in community hospitals.

Alastair continued: "I would like to thank everyone who contributed to this fantastic event. Feedback from those who attended was extremely positive. It was great to see staff so engaged, motivated and committed to patient safety."

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 York Teaching Hospital NHS Foundation Trust, and we are committed to improving the experiences of our patients and their families when they access our services.

We welcome feedback from patients, relatives and carers and there are a number of different ways the Trust captures this feedback including:

- National and local surveys
- Concerns and complaints
- Positive feedback
- Involving service users through our Patient and Public Liaison forums

Our new Patient Experience Strategy was launched this year, and was developed following in-depth consultation with patients, carers and staff and launched at the Trust's nursing conference in September 2015.

The strategy sets out our high level objectives to improve the experience of patients over the next three years. We will achieve this through five overarching commitments:

- Involving patients in decisions about their care and delivering a service that is responsive to their individual needs
- Listening to our patients, welcoming feedback and sharing the results from ward to board
- Responding to feedback so people can see how their views and experiences are making a difference
- Learning from what patients tell us about their experiences, both what was good and what we could do better
- Nurturing a culture of openness, respect and responsibility.

Complaints

In 2015-16 the Trust received 459 formal complaints.

	Q1	Q2	Q3	Q4	Total
York Hospital	Data not available		47	70	118
Scarborough Hospital			44	35	136
Bridlington Hospital			1	3	107
Community Services			3	2	110
TOTAL	118	136	95	110	459

Every complaint receives a full investigation led by a matron or senior manager. New guidance and training has been provided to investigating officers to help them provide open, empathetic responses which answer the issues raised.

Compliments

We highly value the kind letters, cards and social media posts that we receive from patients and their families thanking staff who have cared for them. Much of this feedback is given directly to the individuals involved.

A small proportion of compliments are also sent to the Chief Executive directly. These help the whole organisation to appreciate the feelings

of many of our patients and their families.

In 2015-16, 701 letters of appreciation were sent directly to the Chief Executive or the Patient Advice and Liaison Service and many more received on the wards. These are just some examples that are typical of the feedback we receive.



"I felt I had to write and express our sincere thanks to all staff on every level for their outstanding care and kindness [my husband] received during his stay. They are an excellent team who work extremely well together. Nothing was ever too much trouble and my husband's care needs were always met with such a pleasant rapport between patient and staff." (Scarborough, Anne Wright Ward)



"The care and attention provided by all levels of staff could not be faulted. [The patient] died a dignified, pain free and peaceful death and we could have hoped for no more." (Ward 36, York)
 "Our experience has been outstanding. All staff showed clinical expertise, respected us as individuals and treated us with genuine care." (York Maternity)



Surveys

Having a clear and accurate picture of patients' experiences of our care requires bringing together information from a range of sources.

A summary of the types of feedback we received in 2015-16 is shown below.

Friends and Family Test

All patients accessing our services need to have the opportunity to respond to a simple question: "How likely are you to recommend our ward/A&E department/outpatient service etc. to friends and family if they needed similar care or treatment?"

In 2015-16 the response rates and proportion of patients who said that they would recommend our service were:

Per cent response rate				
	Q1	Q2	Q3	Q4
Inpatient	19.09%	21.40%	16.66%	23.11%
Emergency Department	7.84%	7.78%	8.26%	15.77%
Maternity	26.60%	26.73%	13.65%	19.26%
Community	2.8%	2.5%	1.2%	
Per cent recommend				
	Q1	Q2	Q3	Q4
Inpatient	95.91%	96.51%	95.26%	96.19%
Emergency Department	82.12%	81.49%	85.61%	80.86%
Maternity	98.57%	98.36%	98.01%	96.66%
Community	99.01%	95.33%	100%	

The results of two national surveys have been received in 2015-16

- National Inpatient Survey 2015
- National Maternity Survey 2015
-

National Inpatient Survey 2015

The Trust improved its level of patient satisfaction since 2014 and reported results which were, overall, above the national average.

Patients expressed few concerns about cleanliness of rooms and toilets, mixed-sex accommodation and privacy whilst being examined or treated.

The areas where patients reported least satisfaction included aspects of the management of discharge and the lack of opportunity to discuss concerns with a member of staff or give feedback about the quality of care.

The Trust Patient Experience Steering Group is overseeing the development and implementation of an action plan based on the insights from the survey. This will include recognising and celebrating the achievements of staff in delivering a good patient experience.

National Maternity Survey 2015

The Trust improved its level of patient satisfaction since 2014 and reported results which were, overall, above the national average.

Compared to the national average, women giving birth in the care of York Teaching Hospital NHS Foundation Trust were more satisfied with the support provided by midwives before and after the birth of their baby and with the cleanliness of the hospital.

Compared to the national average, women giving birth in the care of York Teaching Hospital NHS Foundation Trust were less satisfied with being given a choice of where to have their baby and the ability of their partner to stay as long as they want after the birth (mainly at Scarborough).

The above two questions have already been acknowledged as areas to improve by senior midwifery colleagues.

A leaflet given when a woman first starts to use our maternity services 'Congratulations on your pregnancy' has been reviewed. It now contains detailed information about the different options for where to have your baby: Scarborough Hospital, Scarborough Midwifery Led Unit (MLU), York Hospital or home.

Regarding partners staying overnight, this has been addressed at York Hospital where the 'chosen companion' initiative was introduced in 2014. Feedback from women and their families is mainly positive.

A new initiative is now in place in Scarborough to encourage companions to stay until mum and baby are settled in the evening and then to go home and get some rest so they can be refreshed the following day.



Maternity survey reveals positive findings

A survey of local women whose maternity care was delivered by the Trust has revealed a number of positive findings.

From the cleanliness of the facilities through to the involvement of their partner, new and expectant mothers rated maternity care across York, Scarborough, Bridlington, Malton, Selby and Easingwold as among the better performing in the country for many aspects of care, according to a survey published by the Care Quality Commission (CQC).

The National Maternity Survey 2015 asked the views of 340 local women about their experience of care before, during and after giving birth, 136 surveys were returned giving a response rate for the Trust of 45 percent.

Key positive findings included 94 percent of respondents felt their partner was involved as much as they wanted during labour and birth, 92 percent had skin-to-skin contact with their baby shortly after the birth, while 98 percent reported the room, ward, toilets and bathrooms as being clean.

The Trust delivers maternity care from York and Scarborough Hospitals as well as to women in the community. Covering a geographical patch of 3,400 square miles the Trust has 240 midwives who deliver 5,000 babies a year.

Liz Ross, Head of Midwifery, explained: "Patient feedback is invaluable to us. It lets us know when patients think we

are doing well and areas where we may be able to make improvements and we are continuously doing this as part of the Friends and Family Feedback which we receive.

"The National Maternity Survey covers the issues that patients consider important in their care and offers an insight into their experience of the Trust. Overall the results are encouraging and highlight some areas of excellent practice across all our maternity services.

"We recognise that there is always more that can be done and will be using the feedback to make further changes to improve the patient experience for our mothers, babies and family members."





Organ donors are remembered with new artwork installation

Two new artwork installations, 'On the Wings of Hope', were unveiled at York and Scarborough Hospitals to recognise the precious gift given by organ donors.

The sculptures were unveiled by Trust Chair Sue Symington at a ceremony prior to National Transplant Week. Staff involved in donation, donor families and transplant recipients were all invited.

Sue said: "On the Wings of Hope are two uniquely beautiful sculptures. They will become a daily reminder for our patients and visitors, for our staff and clinicians, of the miraculous and life changing gift of organ donation and the selflessness of donors and their families, to whom we are all grateful."

Joanne Brooks, Specialist Nurse for Organ Donation, who coordinated the event, said: "The artwork is a beautiful tribute to organ donors and their families who have made the selfless decision to save the lives of others, and also highlights the fragile journey that transplant recipients face. We hope that the artwork encourages people to think about their organ donation decision and to discuss their wishes with their family and friends."

Metal artist Salina Somalya was commissioned to work on the pieces which represent the fragile nature of the transplant process.

Salina researched the transplant process talking to recipients of donated organs, clinicians and those who



Joanne Brooks, Specialist Nurse for Organ Donation, in front of the 'Wings of Hope' artwork

have donated organs to others. Through this she came up with the idea of wings conveyed through the delicate form of feathers. These are made of aluminium and each one has been hand coloured using dyes and inks.

The new Trust Organ and Tissue Donation Policy has now been published on Staff Room in policies and procedures.

Elected to represent you

Every NHS Foundation Trust is required to have a body of elected governors. York Teaching Hospital NHS Foundation Trust has a Council of Governors, which is responsible for representing the interests of 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 Chairman and other non-executive directors
- The approval of the appointment of the Chief Executive
- The appointment and removal of the external auditors.

Their role also includes:

- Representing the interests and views of local people
- Regularly feeding back information about the Trust, its visions 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 Monitor (the Foundation Trust regulator)
- Being consulted on any changes to the Trust's constitution
- Agreeing the Chairman's and non-executive directors' pay
- Providing representatives to serve on specific groups and committees
- Informing Monitor 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

Partner governors (appointed by their organisations):



Voluntary sector: 1 seat
Michael Beckett (North Yorkshire and York Forum)



Local authority: 3 seats
Caroline Patmore* (North Yorkshire County Council)



Chris Pearson (North Yorkshire County Council)



Joseph Riches*
(City of York Council)



John Galvin
(City of York Council)



Dee Sharp* (East Riding of Yorkshire Council)



Steve Lane
(East Riding of Yorkshire Council)



The University of York: 1 seat
Rowena Jacobs

Public governors (elected by Foundation Trust members)

Bridlington: 2 seats



Terry Atherton*

Pat Stovell



Clive Neale

Hambleton: 1 seat



Jane Dalton

Ryedale and East Yorkshire: 3 seats



Jeanette Anness

Sheila Miller



Jenny Moreton*



Scarborough: 2 seats



Sue Wellington*

Diane Rose



David Wheeler



*denotes governors who resigned during 2015/16

Selby: 2 seats



Ann Bolland **Andrew Butler**



Whitby: 1 seat



Stephen Hinchliffe

York: 5 seats



Paul Baines* **John Cooke**



Helen Fields **Margaret Jackson**



Penelope Worsley **Robert Wright**



Staff governors: 5 seats

Scarborough and Bridlington Hospitals: 2 seats



Helen Noble

Andrew Bennett



York Hospital: 2 seats



Liz Jackson

Mick Lee

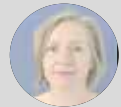


Community-based staff: 1 seat



Les North*

Sharon Hurst



*denotes governors who resigned during 2015/16

Lead Governor's report



By Lead Governor
Margaret Jackson

“ This year has seen much change and many challenges for the organisation and the Council of Governors. At the end of 2014-15, governors were responsible for the appointment of the new Chair, Sue Symington, who took over from her predecessor, Alan Rose, on 1 April 2015.

Sue's appointment has brought with it the opportunity for governors to review their roles as individuals and as a whole council and agree how this can be developed.

NHS Providers, an organisation that provides support to foundation trusts and governors, have started to hold events for governors that give them an opportunity to meet colleagues from other trusts, listen to and debate issues that impact on all trusts and learn from each other. Two governors from York Teaching Hospital NHS Foundation Trust attended the first national conference for governors held in

London and four governors attended the first regional event held in Doncaster. Governors who attended provided feed-back to help the development of the Council of Governors.

One presentation heard at the regional meeting was from the CQC who outlined their vision for how inspections take place and the importance of the Council of Governors in this. Governors expressed concern about their involvement in the inspection of the Trust. Senior staff within the Trust had been very supportive of governors being involved but this was not supported well by the inspection team from the CQC.

It became apparent at the regional meeting that whilst some Trusts' Council of Governors had been very involved, this had not been the case in every Trust. This issue was to be reviewed by the CQC and the involvement of the Council of Governors in the inspection formed part of the newly developed CQC strategy document.

“ Sue's appointment has brought with it the opportunity for governors to review their roles as individuals and as a whole council and agree how this can be developed.



Governors were concerned that agendas for meetings were so full it left little time for discussion and often their issues were not raised or debated. To help address this, a governor forum was set up. The forum is held on an informal basis prior to a Council of Governors meeting. Governors can raise issues they wish to discuss with their governor colleagues, share feedback from meetings or discuss items that they might like adding to agendas for a relevant meeting.

The meeting is chaired by the Lead Governor and is attended by the Governor and Membership Manager. Any issues that the Governors would like to raise with the Chair are taken forward by either or both of these people.

One particular issue the new Chair would like to improve on is the membership of the Trust. A membership group, chaired by the Governor and Membership Manager, has been set up. Governors are working with the Governor

and Membership Manager and are involved in supporting the organisation to develop the membership by both increasing the number of members in the differing age groups and from all areas and in encouraging the increased involvement of members in Trust activities.

Drop-in sessions were held in January 2016 at venues across the Trust led by local governors. The main aim was to give the opportunity for members to meet with their local governor, hear about developments within the Trust and discuss issues that were important to them. These sessions have been evaluated and the lessons learnt are helping to formulate plans for any future events. A Membership Strategy has been formulated and shared. It is apparent that the majority of staff remain unaware that unless they have opted out, they are automatically members of the Trust. The Governor and Membership Manager and Head of Communications have held a session with the Staff Governors to discuss their role and how this can be fulfilled.

Continues on next page →

“Governors are working with the Governor and Membership Manager and are involved in supporting the organisation to develop the membership by both increasing the number of members...”



Lead Governor's report continued

Continued from previous page →

Governors have also been involved in the recruitment of senior staff including the Medical Director and welcomed this opportunity to have input into the future of the Trust. Grant Thornton, the Trust's external auditors, also undertook the Well-Led Review and have presented their findings to the Trust. As Lead Governor I was part of this review and my views on issues were sought. The review findings have been shared with all governors to ensure that the Council of Governors is aware of what is carried out well and what could be improved upon within the organisation.

Everyone is very aware of the financial pressures that the organisation is under and that meeting targets is proving extremely difficult. Despite this, it is very pleasing to hear at every board meeting that patient

care and the patient experience remains at the forefront of everyone's agenda. Patient stories, positive and negative, are shared and discussed at many meetings within the organisation. Lessons learnt are also shared so that everyone is made aware of changes in practice to address concerns. Governors have taken the opportunity to meet patients, their relatives and the community in general in many ways, such as by participating in the Patient Led Assessment of the Clinical Environment (PLACE assessments), attending local patient participation groups or any meetings held locally where healthcare may be discussed.

It was again a real pleasure for governors to attend the Celebration of Achievement Award night to hear about all the fantastic work that staff are undertaking, sometimes under very difficult circumstances. Their commitment and dedication to making things right for patients has to be acknowledged and our thanks go to everyone.

“ *It was again a real pleasure for governors to attend the Celebration of Achievement Award night to hear about all the fantastic work that staff are undertaking* ”



Thank you to our wonderful volunteers!



The Trust values the time and care that volunteers bring to their roles, in partnership with Trust staff, in order to make a genuine difference to the experiences of our patients.

The two 'thank you' events in York and Scarborough sought to recognise the contribution our volunteers make, and gave the Trust an opportunity to say thank you.

Trust Chair, Sue Symington, said: "Our volunteers are special! They play a vital and valued role in the work of our hospitals, freely giving their own time, with the aim

of improving our patients experience while in our care.

"The Board of Directors and the Council of Governors both recognise the value of volunteering: value for the volunteer, value for our Trust staff and most importantly value for our patients and their families and carers.

"We will be working with our partners and stakeholders in the year ahead to find innovative ways to develop volunteering opportunities in our Trust, across all sites."

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.

Membership numbers by constituency	
Constituency	Membership at 31 March 2016
York	5788
Selby	1649
Hambleton	722
Ryedale and East Yorkshire	1555
Bridlington	444
Scarborough	426
Whitby	249
Out of Area	675



Free CPR sessions introduced for Members

The Trust has launched Medicine for Members, a series of exclusive talks and events for members of the Foundation Trust.

The first event was a basic CPR training session which took place on a number of dates at Scarborough and York Hospitals.

Cardiopulmonary resuscitation or CPR is a lifesaving technique useful in many emergencies in which someone's breathing or heartbeat has stopped.

Lynda Provins, Membership and Governor Manager, explained: "As a new benefit for our members we are offering them the opportunity to take part in a free basic CPR training session. This opportunity is also available to new members who sign up to become part of our membership community.

"The sessions which will be run by our trained staff will take place at York and Scarborough Hospitals. They will give a basic overview of both adult and paediatric CPR covering basic understanding, choking and how to use an Automated External Defibrillator (AED)."

The events were fully booked and were well received by those taking part. As a result, further events will be planned.



Members try out CPR techniques

Our staff

Being attractive to new staff

In 2015-16, the Trust has extended its innovative campaigns for recruitment to vacancies for both clinical and nursing staff positions including careers fairs, open days and city visits.

Looking after our current workforce and ensuring their health and wellbeing

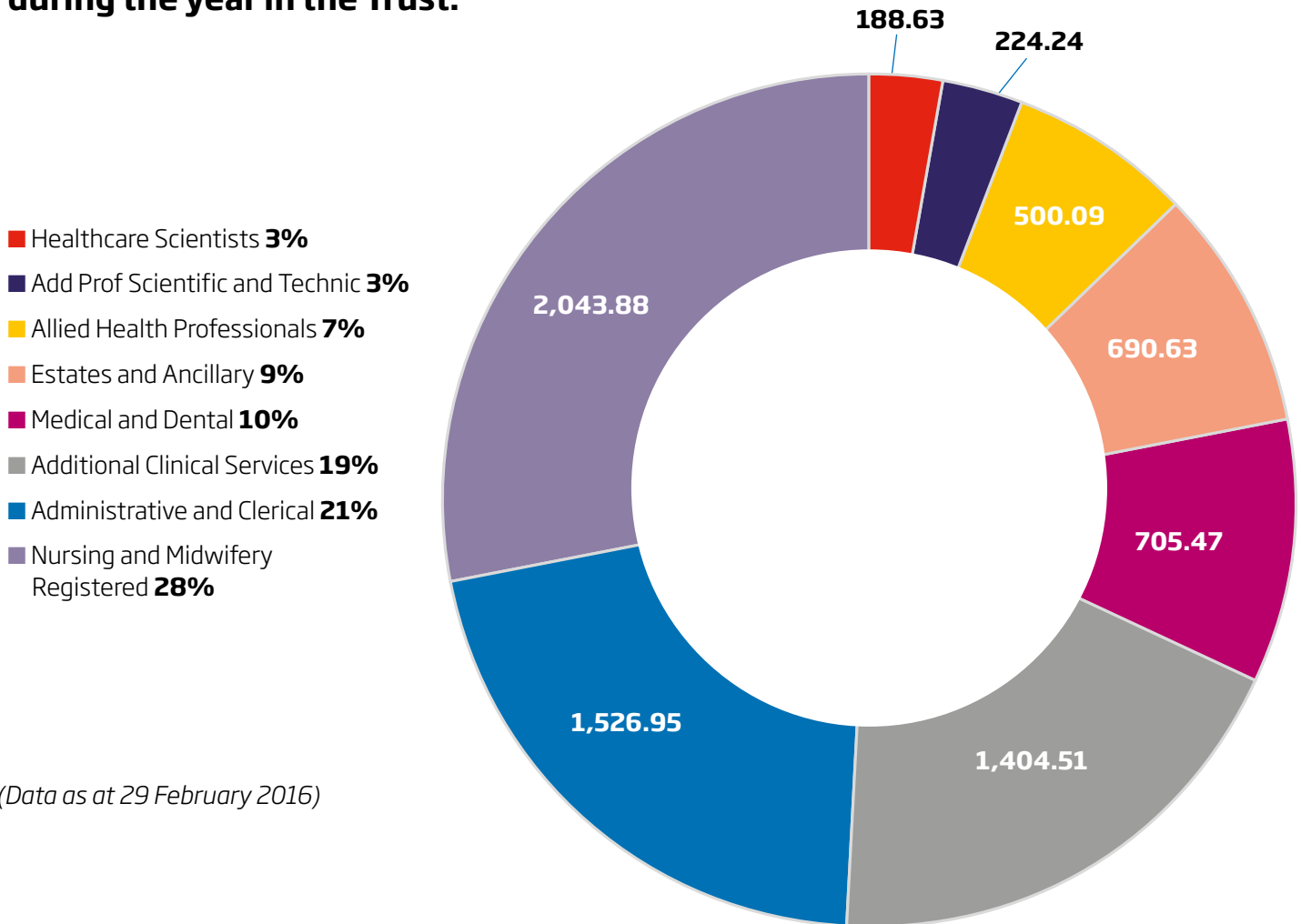
The established work around staff health and wellbeing has continued and in 2015 the organisation was highlighted as one of 12 exemplar organisations by NHS England for our health and wellbeing work. This has resulted in the organisation being identified as a pilot site for NHS England and Simon Stevens' Healthy Workplaces Initiative.

Developing a workforce fit for the future

The current workforce strategy has five key strategic aims which will help us to become an employer of choice:

- To improve workforce utilisation and design and create a sustainable, effective and flexible workforce for the future
- To improve the health and wellbeing of our workforce
- To work in partnership with directorates to achieve continuous improvement and deliver a safe and high quality service
- To improve both local engagement and awareness of equality and diversity issues across the Trust and the community that we serve
- To create and sustain an open and transparent culture.

The table below shows the number of full time equivalent staff we have in post during the year in the Trust:





New EU recruits settle in



At the beginning of the year the Trust recruited 30 nurses from the EU. Nurses from Spain, Italy, and Hungary were welcomed with more appointments in the pipeline which should see around 60 nurses in total recruited from the EU.

Beverley Geary, Chief Nurse, said: "We're absolutely delighted with our new recruits. I have met many of them and have been very impressed with how keen they are to get straight to work. They are adapting really quickly to the way we work at the Trust which for some is very different to how they have trained in their own country."

The recruits are supported by the nursing team

from moment they arrive, from being given help with arranging a UK bank account to being met from the train and taken to temporary accommodation arranged by the Trust. They are guided through induction and are given time for orientation on the ward by shadowing staff so they can get to know people before they start to work independently.

Beverley continued: "It's been a great success so far thanks to a team effort from HR, Estates and Facilities and the nursing team who have put in a lot of work behind the scenes to make sure our new recruits were appropriately welcomed and supported."



Thumbs up for Bridlington Hospital food

A recent patient food survey conducted on the wards at Bridlington Hospital has revealed an overwhelming thumbs up for the new food being supplied from the catering department at York Hospital.

The new service, which began at the beginning of September, means that food is cooked in the kitchens at York Hospital and transported in a chilled van to be reheated on site at Bridlington. The menus have been devised working with the Trust's own dieticians.

Dawn Stead, Assistant Catering Manager, said: "We have had over 40 patient surveys back, all very positive about the food, temperature, portion size and service at ward level, with only one complaint which was very constructive. Getting such positive feedback is fantastic news and we can see we are being appreciated for our work by patients and staff."

Bridlington Hospital Chef, Ken Brown, is active on the wards and speaks to patients on a daily about their food choice.

Ken said: "Comments from patients have been very positive and the new service has reduced waste."



Chef Ken Brown with Julia and Leanne

Managing our finances

The table below provides a high level summary of the Trust's financial results for 2015/16.

Summary financial performance 2015/16

	Plan	Actual	Variance
	£m	£m	£m
Clinical income	413.4	417.0	3.6
Non-clinical income	36.9	41.8	4.9
Total income	450.3	458.8	8.5
Pay spent	-309.9	-318.4	-8.5
Non-pay spent	-151.3	-162.8	-11.5
Total spent before dividend, and interest	-461.2	-481.3	-20.0
Operating deficit before exceptional items	-10.9	-22.5	-11.6
Transition support	10.9	10.9	0
Dividend, finance costs and interest	-7.4	-7.2	0.2
Net deficit	-7.4	-18.8	-11.4

Our income 2015-16

Clinical income totalled £417.0m, and arose mainly from contracts with NHS Commissioners, including Vale of York CCG, Scarborough and Ryedale CCG, East Riding of Yorkshire CCG, NHS England and Local Authorities (£414.3m), with the balance of £2.7m from other patient-related services, including private patients, overseas visitors and personal injury cases.

Other income totalled £41.8m and comprised funding for education and training, for research and development, and for 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 £10.9m in 2015-16. In 2016-17, the Trust will receive transitional support for one final year.

The Trust re-values all of its property fixed assets, including land, buildings and dwellings at the end of each year, 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 2015-16 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 deficit of £18.8m, compared with a planned deficit of £7.4m, in part due to the loss from the asset impairment of £1.7m; with the balance due to increased agency/ locum costs caused by medical and nursing recruitment difficulties, there was a higher level of contract penalties than anticipated.



New DVD created to enhance recovery

A new video has been produced by the enhanced recovery team at York Hospital that will help people recover more quickly after having major colorectal surgery.

The team regularly discuss the enhanced recovery programme and how it can be further developed. The idea of a DVD came up as a way to further empower patients to lead their own recovery and get back to full health as quickly as possible.

Consultant Dibyendu Bandyopadhyay led the project to bring the DVD to life using their own team to share the very same information that people are given face to face.

Dibyendu said: "Having an operation can be both physically and emotionally stressful. I'm very grateful to the team for all their hard work in making this DVD which gives the patient all the information they need about the programme and what to expect. It introduces the clinicians involved in their care and why it's important to follow the programme and what this will achieve for them.

"The DVD is being given to patients prior to their surgery to help inform them of what is to come and it can be used as a guide throughout their journey as to what to expect next, and what they can do for themselves to aid in a quick recovery."

From October patients that are suitable for the enhanced recovery programme will be given a DVD in their outpatient appointment, with a link to YouTube and a QR code in their patient information.

Many hospitals have an enhanced recovery programme



The enhanced recovery team

in place, and it's now seen as standard practice following surgery. Sometimes referred to as rapid or accelerated recovery, enhanced recovery ensures that patients are as healthy as possible before receiving treatment, receive the best possible care during their operation and receive the best possible care while recovering.

Research has shown the earlier a person gets out of bed and starts walking, eating and drinking after having an operation, the shorter their recovery time will be.

To view the video go to the Trust's YouTube channel, York Hospital Enhanced Recovery.

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 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 known as Monitor. Details of the Trust's performance during the year can be seen in the following table.

Indicator	Target	Q1 15/16	Q2 15/16	Q3 15/16	Q4* 15/16
Total time in ED under 4 hours	95%	88.3%	91.5%	87.1%	85.0%
Referral to treatment time, 18 weeks in aggregate, incomplete pathways	92%	92.8%	93.8%	94.0%	93.0%
Cancer 2 week wait (all)	93%	93.9%	91.9%	95.2%	93.5%
Cancer 2 week wait Breast Symptomatic	93%	91.4%	94.0%	94.8%	95.1%
Cancer 31 days from diagnosis to first treatment	96%	96.2%	99.3%	99.55%	98.6%
Cancer 31 days for second or subsequent treatment - surgery	94%	94.4%	97.3%	95.5%	96.2%
Cancer 31 days for second or subsequent treatment - drug treatment	98%	99.6%	100%	100%	99.2%
Cancer 62 day wait for first treatment (urgent GP)	85%	87.8%	85.1%	84.5%	85.8%
Cancer 62 day wait for first treatment (NHS Cancer Screening Referral Service)	90%	98.4%	92.0%	97.0%	90.4%
Diagnostics - 6 week wait referral to test	99%	94.6%	98.67%	99.43%	99.6%



Revolutionary new service for liver patients

A brand new Trust wide service focusing on diseases of the liver has been launched at York Hospital and is already set to double in size.

After taking almost four years to set up, the Hepatology Service has come to fruition thanks to Consultant Hepatologist Charles Millson, who brings this particular area of expertise to the Trust.

Charles said: "It's an exciting new development for the Trust to be able to offer a service that concentrates on the medical management of diseases that affect the liver, gallbladder, biliary tree and pancreas.

"We will be seeing patients with diseases of the liver including fatty liver disease, liver cirrhosis and liver cancer as well as viral hepatitis. Patients will no longer have to be referred to specialist services in Leeds and Newcastle, they will be able to be treated at York and Scarborough Hospitals. We already have a waiting list of patients who are choosing to opt for our service so they don't have to travel."

Central to the new service is the £80,000 high tech fibroskan, a type of ultrasound that can measure the degree of scarring in the liver. It shows the condition of the liver and allows doctors to diagnose and monitor diseases.

Charles continued: "The fibroskan is a huge asset to the service as it is a quick, painless test that gives immediate results. It doesn't have any potential complications or risks and is non-invasive so it provides an excellent alternative to liver biopsy. The result is immediate and can be used in most liver conditions including



Consultant Hepatologist Charles Millson and Specialist Nurse Susan Sheridan

those patients who have progressed to cirrhosis.

"As many as one in ten people have problems with the liver at some time in their life. Although alcohol abuse is one reason, in fact the causes are more wide-ranging and the incidence of almost all types of liver disease is rising. In the UK liver disease is the only major cause of death still increasing year-on-year so we anticipate a busy time ahead!"

Community services

In last year's annual report, we described the work York Teaching Hospital Foundation Trust was doing with partners (including North Yorkshire County Council, local GPs, voluntary service organisations and our commissioners) to test new ways of working in Selby and Ryedale.

Our 'care hubs' provide enhanced support to people to allow them to remain in their own homes during a health crisis or to return home sooner following a stay in hospital. Health and social care staff work together providing short-term support when people need it most. Between February and November 2016, over 1,150 people had received support from the teams – with around 2,500 contacts every month.

Our teams were established with a learning culture, meaning they are always seeking ways to improve and develop their service. With this in mind, both teams held large events in September and October 2015 where they invited people with an interest in the service to come and tell them what was going well, and what they could do better. This included a range of people who had used the service who were able to share their moving experiences of the difference it had made to their lives, and to those who provided care and support to them.

Within our 'care hub' developments we have also looked to provide support to people who live in care homes. A consultant who specialises in the care of older people carried out reviews in partnership with

GPs, specialist nurses and care home managers. These looked at the medicines people were taking, stopping those that offered little benefit, and the care plans that were in place. They discussed with individuals and their families what their preferences were and jointly agreed the best treatment options. Over 500 care home residents have now been reviewed and plans are in place for this to continue in 2016. In Ryedale, these reviews resulted in over 200 medicines being stopped and over 150 new care plans being put in place.

Within our Ryedale service we were also excited to trial a new partnership with the voluntary sector. Coast and Vale Community Action (CAVCA) support community and voluntary organisations across Scarborough and Ryedale and have re-located to base themselves in the hub. We worked together to develop a new 'Community Enabler' role, employed by CAVCA, who can provide signposting and guidance to those using our services to find community support to help them maintain their independence. This could include local activity clubs, help with managing correspondence or dementia services.

What is next for 2016-17?

The developing care hubs were designed with commissioners to understand how we could deliver services in the community that would be fit for the future. We know that successes in health and society mean that people are living longer and as a result that we need to adapt to the changing needs of our communities. We

Community services continued

have identified that our vision is 'community first', which will mean providing more support to people in their own homes, rather than in hospital beds. We will focus on delivering personalised care and supporting people to be independent, with a much greater emphasis on prevention.

We know that we cannot do this alone. The King's Fund recently published 'Place Based Systems of Care' which outlined the changes the NHS organisations need to make to work differently with partners in our communities. The report drew attention to the development in York of a 'Provider Alliance Board' where those who provide health and care services (including voluntary organisations) come together to agree on new ways of working.

The Provider Alliance Board is developing a blue print for a new model of care in the community. Working in defined geographical areas, we want to bring together those working in the community into integrated teams, working in partnership with local GP surgeries. This will help us to deliver what people have told us matters to them - only needing to tell their story once, better co-ordination between the different individuals who provide support and helping them to achieve the goals that are important to them.

Home first

We know 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. We also know that hospital is not a good place to try and assess people's long term needs, especially as someone is recovering from a period of illness.

To address this, York Teaching Hospital NHS Foundation Trust is working with local partners in adult social services, mental health, primary care and the voluntary sector to change how and where we carry out assessments of people's needs. We are working to ensure that as soon as someone's medical needs can be managed at home, we provide the support to allow them to continue their recovery there. We have already started to test different ways of working and through 2016-17 will identify the support services that need to be in place in the community to allow us to provide this to everyone.





Community Response Team helps Ryedale residents stay out of hospital

The Community Response Team Ryedale was given the thumbs up by residents after only a few months.

The service provides assessment, care, treatment and rehabilitation for patients in their own home so people can reduce their stay in hospital, return home and retain their independence.

The team of health and social care professionals includes physiotherapists, occupational therapists, community nurses, support workers and social workers who work together to provide up to six weeks of rehabilitation in people's own home.

One patient who has seen huge benefits from the service is Doris 'Bunny' Hodgkin, 85, and her husband Ken.

Bunny was referred to the team following a fall at home where she damaged her hip. The pain meant that Bunny had severe difficulty getting around the house and both Bunny and Ken were struggling to cope with general activities of daily living.

Bunny said: "I was confined to a wheelchair when the team first came out to me and needed help with everything. They came in three times a day and helped me to walk and become independent again. They worked with me to get me up and around. Nobody could believe the difference in just six weeks. It was a pleasure to have the team in my home and I miss them all."

Through the team's support and her own hard



Above: the team

Right: with Bunny and Ken Hodgkin



work Bunny is now mobile around her house and the couple have even been out for a trip in their car.

Scott Caul, Physiotherapist with the team, said: "The feedback from patients so far has been fantastic. Most people would prefer to be back in the comfort of their own home environment, with the support of their family, rather than sitting on a hospital ward.

"Rehabilitation provides the basis of the care plan that helps patients recover and prevents them coming back into hospital. It's a win-win situation and it's proving very encouraging."



iPads set to revolutionise Scarborough speech and language

A successful bid for funding for iPads to help stroke patients with speech and language therapy is set to make a big difference.

Speech and Language Therapy Assistant Mark Poole applied for the funding of iPads for patients on wards and in the community in Scarborough after research has shown that technology can greatly enhance communication for people with stroke. Using an iPad has the dual purpose of making it easier and quicker to assess patients and offers software that helps with therapy.

Mark explained: "Using an iPad improves a patient's ability to communicate and make their needs known so we are able to make an accurate assessment of their needs and provide highly individualised and timely therapy much more quickly. We've only been using them since August and already we are able to see more patients and provide more targeted therapy specific to the patient's language and communication difficulty.

"It's already accelerating the rate of recovery and building patients' confidence and self-esteem when they find they are able to communicate effectively and can see improvements in their speech and language."

Mark has researched the many software packages and apps on offer that will help him in his work, and to signpost to patients to help them make their own progress.

Mark continued: "There has been a gap in the service which technology can fill. For example with an iPad we can use software that helps a patient communicate by spelling out words, using symbols to communicate feelings and moods,



Mark Poole demonstrates iPads as a therapy aid

and text to speech so they can express themselves. Instead of using paper-based therapy materials we can use apps that are much more up to date and are more relevant to patients."

The iPads have been provided by the Friends of Scarborough Hospital and York Teaching Hospital Charity.

Val Birch, Speech Therapist at Scarborough Hospital, said: "We are extremely grateful to both charities for providing the iPads. The difference this new technology makes for staff and patients is fantastic, it's already made a big impact. The feedback from patients is that they are getting so much more out of their therapy sessions and it gives them the opportunity to continue in their own time if they have an iPad."

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.

The role of the research staff is to ensure that the research is run safely, to the highest possible standard and produces high quality data working to local guidelines and national and international regulations.

The Trust is a partner organisation within the Yorkshire and Humber Clinical Research Network (Y&H CRN). The Y&H CRN provide funding to support research staff who work across a wide range of specialities within our trust. We conduct research across the majority of our directorates and last year we recruited over 2000 patients into clinical trials.

Listed below is the range of studies the Trust is part of as of 31 March 2016

	Active and Recruiting	Active and in follow-up
Anaesthetics	7	2
Cancer & Oncology (York)	17	24
Cancer & Oncology (Scarborough)	18	13
Cardiology	6	4
Dermatology	7	1
Emergency Department	3	1
Clinical Research Facility+	1	1
Gastroenterology	2	2
Generic Team (York)+	14	2
Generic Team (Scarborough)+	23	3
Neurology	2	2

	Active and Recruiting	Active and in follow-up
Obstetrics	5	4
Ophthalmology	11	5
Palliative Care	0	0
Paediatrics	9	0
Renal	12	2
Rheumatology	8	2
Sexual Health	4	2
Stroke	8	2

+These teams support research across a number of specialities including sexual health, stroke, ICU, A&E, Orthopaedics, Tissue Viability, Dementia.

In 2015/2016 in York and Scarborough alone we had over 160 research studies open and a further 71 in long term follow up. Disease areas we particularly focussed on were diabetes, dementia and obesity research due to the increasing challenges these areas are having on the health of the nation.

We have had many research success over the year, one particular success for our Trust has been the area of 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.



Reducing carbon emissions at Scarborough and Bridlington Hospitals



Left: new equipment is delivered to Scarborough . Right: the opening of the Bridlington energy centre

The Trust's strategy to reduce carbon emissions by 26 percent by 2020 is already exceeding expectations in York and is set to be rolled out at Scarborough and Bridlington Hospitals.

A £4.4million investment in essential infrastructure is planned which is set to reduce the Trust annual carbon emissions by around 2,800,000 kilograms, a reduction of around 30 percent annually.

Over the next six months the already successful York projects will be delivered at Bridlington and Scarborough Hospitals.

Nigel Watkinson, Estates Manager for Scarborough and Bridlington, said: "We have been able to provide much needed investment in obsolete plant which means we can deliver significant savings across both sites that will improve year on year. The investment will see us delivering continued carbon

emission reduction for our Trust for the next fifteen years.

"Reducing carbon emissions reduces energy consumption, which in turn reduces costs to our Trust. We expect to reduce annual operating costs by around £520,000, increasing annually as energy costs rise."

The savings will come from a number of projects. Each site will be able to generate the majority of their electricity needs from a new combined heat and power unit and use recovered heat to contribute to the needs of the hospitals. It will also offer the ability to export electricity to the surrounding area in times of need.

Improved equipment and heating controls will deliver better reliability, better comfort levels and reduced gas usage. New improved technology lighting will be fitted to deliver enhanced performance and reduce electricity usage.



Major Trauma training sets new standards for the Trust

A new approach that will help save the lives of patients suffering from major trauma is set to see staff at York and Scarborough Hospitals become some of the first in the Yorkshire to access new training in trauma care.

The North Yorkshire and Humberside Major Trauma Network has launched a Trauma Intermediate Life Support (TILS) Instructor Training course with the aim of supporting Trusts to train staff to deliver vital trauma care training within their organisations.

The training, hosted recently at Scarborough Hospital, is the first of its kind in the region and is fast becoming the entry level trauma qualification across the country.

Dr Phil Dickinson, Scarborough Hospital's Consultant for Anaesthesia and ICM, is Network Lead Clinician for North Yorkshire and Humberside Major Trauma Network and has been at the forefront in bringing this pioneering initiative to the region.

Phil said: "It's an exciting new development for the Trust and for trauma care in the region. We have trained 33 instructor candidates from across eight hospitals and two ambulance services to become qualified TILS Course Instructors. The aim is that within two years we will have trained 90 percent of our trauma teams in the region in these specialist skills.

"Major trauma is the leading cause of death for adults under 40 years of age in the UK. Over a number of years the level of care in England for these patients has been shown to be in need of improvement. The National Audit Office



report estimated that there are 20,000 cases of major trauma per year in England and 5,400 people die of their injuries with many others sustaining permanent disability. Many of these deaths could be prevented with systematic improvements to the delivery of major trauma care."

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.

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 is as follows:



*Ms Susan Symington
- Chairman*



Mr Philip Ashton - Non-executive Director, Chairman of the Audit Committee and Senior Independent Director



Mr Michael Keaney - Non-executive Director



*Mr Patrick Crowley
- Chief Executive*



Mrs Jennifer Adams - Non-executive Director



Ms Libby Raper - Non-executive Director



*Mr Michael Sweet -
Non-executive Director*



*Professor Dianne Willcocks
- Non-executive Director
and Vice Chairman*



*Mr Andrew Bertram -
Executive Finance Director*



*Mrs Beverley Geary -
Executive Chief Nurse*



*Mrs Sue Holden - Executive Director
of Workforce and Organisational
Development (on secondment
for part of the year)*



*Mr Mike Proctor - Deputy
Chief Executive*



*Mr Jim Taylor -
Executive Medical Director*



*Mrs Juliet Walters - Chief
Operating Officer*





"It is no longer enough to focus on our own organisation and our patients, we must think more widely as a whole system. I have no doubt that the year ahead will continue to challenge us, but the change in approach to partnership working and the commitment of our staff will ensure that we can meet this challenge."

Patrick Crowley, Chief Executive



StarAward



Meet some of our stars



StarAward



Our monthly Star Award is given to teams, individuals and volunteers who go above and beyond to make a difference for patients and staff.

You can nominate by visiting www.york.nhs.uk/staraward



Find out more...

To learn more about us or to read our full annual report and accounts for 2014/15 visit: www.york.nhs.uk



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To become a member of York Teaching Hospital NHS Foundation Trust, you can:

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