

# Annual Report and Quality Accounts Summary 2022/23





## While contemplating how to sum up the last 12 months, it would be fair to say it's been a rollercoaster of a year.

We began the last financial year in April 2022 at National incident level 4, remaining at this level until June. Throughout the year we had to constantly adjust to changes to testing regimes, visiting arrangements, Infection Prevention Control measures and social distancing rules and regulations. The legacy of the pandemic then hit us in the winter when we faced the most challenging winter the NHS has ever faced, partly because of an increase in respiratory patients following two winters of supressed transmission due to lockdown. And if that wasn't enough, we then had to contend with the fall-out from a wave of industrial action and the new set of challenges this brought.

But despite the unprecedented pressures we have experienced, I'm delighted to be able to welcome you to a very positive annual summary report for 2022/23. I am exceptionally proud of the achievements we've made over the months earlier, in October 2022. past year in delivering healthcare services to our patients, despite these big challenges.

Key areas of activity that we focused on included improving patient flow, developing our approach to integrated care and improving productivity.

Crucially, many of our own objectives tied in with those of the Herefordshire and Worcestershire Integrated Care Board which came into being last year and marked a significant shift in the mindset for the delivery of health and care services across the two counties.

Areas of focus under the Integrated Care Board umbrella included the reduction of long waits for elective care, the return of cancer waiting times to pre-pandemic levels, reducing ambulance handover times and developing plans to address workforce challenges.

In September 2022 we were already facing severe pressure with demand for services having reached winter levels - we knew we had to do something different if we were to continue providing safe services for our patients through the winter period.

By October, after many conversations and discussions, we introduced proactive "reverse boarding" - the process of caring for additional patients on wards above the usual bed base by selecting less unwell patients to be cared for in unauthodox spaces.

This created extra capacity on our wards to accept patients from the Emergency Department (ED) who needed admitting, which allowed a quicker through-put of patients in ED, and resulted in shorter ambulance handover times.

This came at a cost though, and throughout the winter

months and well into spring, we continued using reverse boarding which, while easing the pressure in ED, spread the pressure across wards and increased the demand which ward staff had to absorb and manage.

Thanks to their tenacity, reverse boarding has been key to making our track record of ambulance handover times one of the best in the region – during one period, our handovers were 25 minutes shorter than handovers at neighbouring Trusts. This particularly came into its own during the periods of strike action and meant we were, in some instances, able to offer mutual aid to other struggling neighbouring Trusts and receive some patients via ambulance who would have otherwise faced long delays in other hospitals.

In December, the Care Quality Commission announced its findings following an unannounced inspection carried out two

It was good news for our patients as the inspectors upgraded the "inadequate" ratings to "requires improvement" in the safety, well led and overall domains for surgery.

Of course, while the results were pleasing, there is still a lot of work to do, it was a clear indication of our determination to become an NHS Trust which is rated "Good" overall in the coming years.

Our Foundation Group continues to go from strength to strength.

In October we refreshed the group's strategy with a focus on prevention – "helping you to help yourself" – and last year we began quarterly board meeting, when the boards of all three Trusts in the group meet to benchmark and share best practice.

And jumping back to May last year, the Foundation Group links meant some Wye Valley NHS Trust patients were seen more quickly - as South Warwickshire University NHS Foundation Trust's orthopaedic surgery waiting lists were among the lowest in England, some Wye Valley NHS Trust patients who were happy to travel to Warwick were treated there.

Overall, it's been a year that has had its highs and its lows, but what really sticks out in my mind is the tenacity and determination of Team WVT to deliver despite the odds. Looking ahead, there is no doubt that we will continue to face challenges in the coming year. But I am confident that we have the right team, the right values, and the right vision to navigate these challenges successfully.

#### **Glen Burley, Chief Executive**

# **Caring for our patients**

The number of patients attending the Emergency Department (ED) increased by 1.5 per cent in 2022/23 compared to the previous 12 months. The volumes of planned patients treated both as "day case patients" and as "inpatients" increased during the year from 2021/22 by 2.3 per cent and 5.1 per cent respectively. This was a direct result of "ring fencing" our elective beds from emergency patients and a reduction in the Infection Prevention Control issues guidance, as the NHS eased COVID-19 restrictions. As a majority of the long-waiting patients required overnight elective admissions, due to complexity. We eradicated the waits for those patients waiting more than two years during the year.

# A year in numbers

A&E attends Inpatient 69,552 admissions **Emergency** 26,612 Acute new and follow-up outpatient attendances Elective 249,754 spells 3,035 Daycase spells 28,407 **General and Acute** emergency Community new and spells follow-up outpatient 20,635 attendances 36,572 **Total births** 1,619

# A bit about our patients...

Patients using our services **118,000** 

Patients seen in the community **32,000** 

Patients seen in Herefordshire 100,000

Patients seen in Powys **11,000** 

Figures are based on the number of individual patients, not number of appointments.

# **Caring for our patients**

# Referral to Treatment (RTT)/52 weeks

In England, under the NHS Constitution, patients "have the right to access certain services commissioned by NHS bodies within maximum waiting times, or for the NHS to take all reasonable steps to offer a range of suitable alternative providers if this is not possible".

The NHS Constitution sets out that patients should wait no longer than 18 weeks from GP referral to treatment. The table below shows our out turn for 2022/23. Despite the reduction in the percentage of English patients definitively treated starting in 18 weeks for 2022/23, the Trust did significantly reduce the number of very long waiting patients. The Trust ensured that all patients waiting longer than 104 weeks for treatment had been managed by the end of June 2021 and practically readicated the number of patients waiting over 78 weeks to less than ten by the end of March 2023. The position for the Welsh patients waiting under 26 weeks for start of treatment did improve to 67.3 per cent.

This has been achieved through our operational

and clinical teams working hard to deliver as much clinical capacity to recover this position during the year.

We are consistently over 100 per cent activity when compared against the corresponding months in 2019/20.

## **RTT incomplete performance**

|                    | Mar-20 | Mar-21 | Mar-22 | Mar-23 |
|--------------------|--------|--------|--------|--------|
| English (18 weeks) | 77.8%  | 54.8%  | 63.6%  | 58.3%  |
| Welsh (26 weeks)   | 83.1%  | 65.9%  | 66.2%  | 67.3%  |

Please note that English commissioned performance is 92 per cent of patients waiting under 18 weeks for treatment, Welsh commissioned performance is 95 per cent of patients waiting under 26 weeks for treatment.

## **Cancer care**

The Trust's cancer performance standards were challenged in 2022/23 with an increase of more than 15 per cent in cancer referrals compared to pre-pandemic levels. This, combined with the pressure on diagnostics support to deliver this increase in capacity, saw a deterioration across our cancer performance indicators. There is a significant focus by the Trust during the next year to achieve our fast diagnosis standard - an approach to speed up cancer diagnosis and improve patient experience.

| Key performance indicators                          | Key<br>target | Actual<br>2019/20 | Actual<br>2020/21 | Actual<br>2021/22 | Actual<br>2022/23 |
|---|---------------|-------------------|-------------------|-------------------|-------------------|
| Cancer two week waits                               | 93%           | 94.6%             | 97.2%             | 92.9%             | 91.1%             |
| Two week waits<br>(breast symptomatic)              | 93%           | 94.5%             | 98.5%             | 74.2%             | 79.5%             |
| Cancer 31 days                                      | 96%           | 93.0%             | 90.6%             | 84.8%             | 88.0%             |
| Cancer 31 days<br>Subsequent treatments             | 98%           | 91.7%             | 90.4%             | 77.8%             | 69.0%             |
| Cancer 62 days                                      | 85%           | 78.0%             | 76.3%             | 71.5%             | 65.2%             |
| Cancer 62 days screening                            | 90%           | 92.3%             | 66.7%             | 76.0%             | 66.7%             |
| Cancer 62 days upgrades<br>(no national target set) | 85%           | 88.4%             | 82.2%             | 74.1%             | 65.2%             |
| 28 Day Faster Diagnosis                             |               |                   | 70.1%             | 64.4%             | 58.8%             |





# **Caring for our patients**

# **Patient experience**

Our patient experience team provides a trust-wide service that reviews incoming comments and concerns as well as reaching out into the communities we serve to gain a better understanding of the whole patient experience. In addition, the team use intelligence from national patient experience surveys to support services to improve the services they provide for our patients.

# Learning from patient and carer experiences

The Trust has expanded the ways in which we gather patient feedback to have more regular and up to date intelligence in relation to the services we provide. We have developed local surveys across all our services; acute and community inpatients, district nursing and outpatients. In addition, the Trust has implemented a text messaging service to gather responses to the Friends and Family Test (FFT). Both the text messaging service and local surveys have greatly increased responses from our patients and provided a more detailed picture of the experience of our patients in our care.

The Trust has re-established its Patient Experience committee, seeking to expand the membership across all staff disciplines to create a more collaborative approach to improving patient experience. In particular, this is important when tackling issues with clinical communication.

## Patient Advice and Liaison Service (PALS)

Patients, families or carer's contact PALS when receiving inpatient care, outpatient care or after care or treatment. They may also contact PALS in relation to delays or lack of communication about their future care and treatment. PALS provide an impartial and confidential service aiming to help resolve issues by addressing them as quickly as possible. PALS will liaise with services across the Trust and other agencies aiming to support the individual to navigate the complexities of the healthcare system and avoid them having to contact multiple agencies to seek the information or resolution they need. PALS also collate compliments about our services to share with colleagues. During the year, the team

received a total of 4,420 contacts summarised in the table below.

# Friends and Family Test (FFT)

# The Friends and Family Test (FFT) is one of the mechanisms for the Trust to seek feedback from patients, their friends and family and act on it.

We encourage take up with staff highlighting on ward rounds, including the link to the on-line survey in discharge letters and with postcards and collection boxes available in most of our reception areas.

In September 2022, the Trust introduced Friends and Family Test with the use of text messaging.

Since its introduction, 5,368 responses have been received representing a 22 per cent response rate, this is in line with the national response rate.

Using alternative data collection methods prior to this only generated a 6 per cent response rate.

92.25 per cent of patients rated their experience positively and patients offer constructive qualitative feedback in addition to the recommendation score. The information is accessible to users through a dashboard with patients also able to leave their comments.

This enables managers to have live data for their areas on patient feedback.

We will continue to roll this project out to all services during 2023/24.

|                   |         | % change last |
|-------------------|---------|---------------|
| Туре              | 2022/23 | year          |
| Concerns          | 912     | -4.30%        |
| Compliments       | 2535    | 35.85%        |
| Comment & Enquiry | 973     | 110.15%       |
| Total all         | 4420    | 34.67%        |

## Complaints down by 25 per cent

During the year, the Trust received 253 complaints. This is a decrease of 25 per cent from the previous year.

Increasing operational pressures and the increasing complexity of complaints received has meant the Trust has not responded to all complaints in the agreed timeframe. This is routinely monitored and the Patient Experience committee is committed to supporting operational colleagues to review processes and improve this position for patients, families and carers.

# Another tough year for our staff

Over the past year, the Trust has faced numerous challenges, including the ongoing COVID-19 pandemic, the busiest winter period the NHS has experienced and more recently, the industrial action which is affecting patients and staff.

Despite these obstacles, our staff have remained steadfast in their commitment to providing excellent patient care. A key achievement over the past year has been the development of our workforce, with particular focus on staff wellbeing and engagement.

We have implemented new training and development programmes, as well as support mechanisms to help our staff manage the challenges of working in a high-pressure environment.

We have further developed our links with local leisure services provider, Halo, and have extended our popular Boditrax 1:1 fitness sessions to cover our community sites. We also now have a weekly after work work-out for staff at the County Hospital.

## **Connecting with nature**



In an innovative move, we have teamed up with the University of Derby to launch a pioineering Nature Connection programme.

It's an established fact that connecting with nature has a raft of benefits and the Trust-wide scheme invited staff to take in the nature on their doorstep at work - including nature forays around the Trust's grounds, taking phtographs for an online exhibition and weekly lunchtime walks within the vicinity of the County Hospital.

This continues into the next 12 months with a continued focus on gleaning the benefits of connecting with nature.



## **Armed Forces awareness**

The Trust is proud to be a Veteran Aware hospital and we have a silver award under the Armed Forces Covenant.



This means:

• We strive to be an exemplar of the best care for veterans and their families

• We encourage all staff and patients to let us know if they have ever served in the UK armed forces so that we can best support their needs

- We are committed to learning from our patients and their families in order to improve quality of care.
- We actively ensure that our staff are aware of our positive polices towards defence people issues.



CONNECTING NATURE

A joint project with the **University of Derby** 

**Details on our intranet** (search for nature conne or point your phone here:



# **Caring for our staff**

## Staff survey shows above average scores in key areas

A summary of the 2022 results for the Trust shows good progress with above average scores in all nine areas of the survey (compassionate and inclusive, recognised and rewarded, voice that counts, safe and healthy, always learning, work flexibly, we are a team, staff engagement, morale).

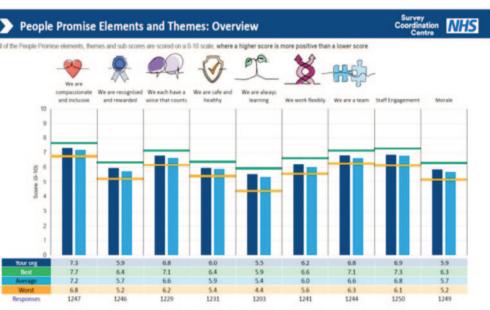
A summary of the 2022 results for the Trust shows good progress with above average scores in all nine areas of the survey (compassionate and inclusive, recognised and rewarded, voice that counts, safe and healthy, always learning, work flexibly, we are a team, staff engagement, morale). This is attributable to a number of leadership, workforce and organisation design initiatives that have been implemented at the Trust over the past few years.

The table above provides a high level summary of the nine key areas of the survey.

In terms of violence and aggression, which was a major area of concern in previous surveys, actions implemented by Trust since September 2021 continue to have a positive impact.

### Industrial action

That said, widespread dissatisfaction has led to ongoing industrial action across the NHS in 2022/23 with many staff being dissatisfied with their pay



and conditions in the light of the rise in the cost of living.

Additionally, information from the 2022 staff survey still indicates that Black, Asian and Minority Ethnic staff are still reporting a poorer experience compared to white colleagues in terms of harassment, bullying or abuse and equal opportunities. Data from NHS Employers indicates that unfortunately this is still the case across many organisations in the NHS.

### **BAME network**

Over the past two years, the Trust has made good progress in establishing the Black, Asian and Minority Ethnic (BAME) network, the LGBT+ network and the Disability network for Trust employees. These staff networks are maturing and over time will

maturing and over time will be able to drive forward and support strategic equality and diversity issues affecting staff at the Trust. The staff survey also indicates that staff with a long term condition or illness, are still reporting a less favourable experience in terms of harassment, bullying or abuse at work. This is also the case in many NHS organisations and the Wye Valley NHS Trust Disability network will be instrumental in supporting initiatives for disabled staff over the next year.

### Managing attendance

The Trust managing attendance policy is being reviewed and provisions will be made in introducing a revised disability health passport to offer more support for disabled staff.

## Workforce and Organisational Development Strategy

The workforce and organisational development strategy identifies the workforce priorities to support the delivery of the Trust's strategic objectives and endorses our commitment to recruiting, developing and retaining a workforce that is engaged and motivated in providing highquality healthcare to our patients.

The key themes in our workforce strategy 2022 – 2026 are:

• Workforce transformation – to have a more efficient and productive workforce

- Growing our own workforce grow and maintain a sustainable and flexible workforce
- Recruitment and retention attract, retain and develop a high quality workforce

These themes are underpinned by enablers which are: Health and wellbeing, equality, diversity and inclusion, leadership and management development, education and training, staff engagement, HR policies and procedures.

# **Caring for our staff**

## Further success with our Health Care Support Worker Programme

The healthcare support worker (HCSW) programme was launched in September 2019 to support NHS trusts to increase their HCSW recruitment, minimise vacancies, avoid reliance on temporary staff and so provide greater continuity of care for patients, and to support more people to progress into nursing and midwifery roles in the future.

At the Trust we have been successful in reducing our **HCSW** vacancy gap from 80 whole time equivalents in 2021 to 34.86 wte at the end of March this year. At the end of March 2023, following successful recruitment and job offers issued this figure will reduce to below ten vacancies

within the first quarter of 2023/24. As part of the **HCSW** programme the Trust also joined forces with Hoople care and together we work in partnership to attract, recruit and retain HCSWs across the county forming 'Together Healthcare' this has proved to be a great success and we continue to maintain this local partnership

working for the local community across Herefordshire.

# tring

# Awards and recognition

The team behind the Trust's Healthcare Support Worker project lifted the prestigious tittle of Health Care Team of the Year at the Hereford Times Health and Social Care awards.

## Nursing recruitment interventions

In the last 12 months the Trust has recruited 110 nurses from a variety of countries across the world with six now placed into the community hospitals. In addition, four paediatric nurses in children's services have been recruited. The majority of the international nurses work in acute medical and surgical teams.

There is a national shortage of registered nurses in the UK, recruitment and retention of the overseas nurses is essential to maintain a quality service for our patients. The Trust has a good reputation for the strong pastoral care it offers its overseas nurses and

overseas nurses and providing a great boarding process.

Once international staff

arrive our pastoral officers support them throughout their transition stage and we see that they settle into Herefordshire. Once they have passed their OSCE exams they then bring their families over and we support their spouses/partners as well. It is a great team effort to recruit and retain the nurses, and everyone is committed to the programme to ensure the nurses are well supported. We can also see how they progress to senior nursing posts in the Trust, enhancing their careers. Maternity services have recruited four midwives

recruited four midwives from overseas, who will be taking their maternity OSCE exams this year to become fully NMC registered midwives.



In addition Aziz Khan, who heads up the Gilwern Unit at the County Hospital was a finalist in the Excellence in Nursing category and our Meet and Greet volunteer team, was shortlisted as a finalist in the Volunteer of the Year category. Also Gemma Boland, healthcare assistant, was shortlisted in the Care Hero Award category.

## **HSJ Awards**

There was a high commendation for the Herefordshire & Worcestershire COVID-19 vaccination programme. The programme was an example of how partners came together to ensure people in the two counties could access and receive their COVID-19 vaccination.

## University of Worcester Mentor Award

The Trust's finalists across categories were: Lucy Knight-Summers (Midwife), MSK Physiotherapy outpatients, Ross Community Hospital, Alison O'Neil and Roberta Rayner (Paediatric OT). Lucy Knight-Summers won the award for Outstanding Mentor of Midwifery Students.

# Working with our partners

# Integrated care and partnership working across the two counties

Our Integrated Care Strategy starts with building on the strengths of individuals and their communities to improve their health – 'helping you to help yourself'.

Integrated care is about giving people the support they need, joined up across local councils, the NHS, and other partners. It removes traditional divisions between hospitals and family doctors, between physical and mental health, and between NHS and council services.

have meant that too many people experienced disjointed care. Integrated Care Systems (ICSs) are new partnerships between the organisations that meet health and care needs across an area, to coordinate services and to plan in a way that improves population health and reduces inequalities between different groups.



In the past, these divisions



System leaders are now focused on coordinating actions at the local level, using the discharge arrangements and improve patient care One Herefordshire Partnership (OHP) to establish place-based approaches that incorporate the crucial role of the developing primary care networks (PCNs).

The OHP is the primary interface with the Herefordshire and Worcestershire ICS, with a primary purpose of strategic planning, approval and engagement, and is chaired by one of the four core members drawn from general practice, Wye Valley NHS Trust, Herefordshire Council or Herefordshire and Worcestershire Health and Care Trust. This place level of working offers the right scale and scope for tackling population health challenges - from health inequalities to the wider determinants of health -

and for maximising opportunities across all public services through integration, service changes and aligned resources. Close working arrangements between all partners is crucial to delivering this. We aim to ensure that the experience of patients, service users, their families and carers is the foundation of how we develop and deliver our services. Our approach focuses on

recovery, partnership working and embedding coproduction into day-today practice.

## Key developments and achievements 2022/23

 Our virtual GP and Community Integrated Response Hub partnership is delivering two-hour response times and is supporting around 500 patients a month and prevented 160 ambulance conveyances over the three months of Winter

- Community teams are working with partners delivering
- improvements at a local level to reduce health inequalities, improve
- We're collaborating closely with partners to create an integrated urgent care pathway that is fit for the future and meets local needs
- We're enhancing care in care homes across Herefordshire
- Improving heart failure and diabetes pathways, optimising patient care
- We're working collectively across the partnership to manage hospital referrals effectively and manage waiting lists
- Continuing to deliver mental health transformation in • Herefordshire to ensure the service meets the needs of the local population
- Developing a shared plan to tackle health inequalities
- Learning collectively from mistakes and celebrating successes
- Taking a joint approach to support worker recruitment

# **One Herefordshire Priorities**

| Core Priorities  | Cross-Cutting                       | Underpinned by   |  |  |
|--|-------------------------------------|--|--|--|
| Integrated Primary<br>& Community Care                   | Children & Young<br>People          | Quality Oversight &<br>Assurance<br>Financial Strategy |  |  |
| Urgent Care<br>Redesign                                  | Mental Health and<br>Wellbeing      | Data and Digital<br>Strategy                           |  |  |
| Elective Care<br>Recovery                                | Health Inequalities<br>& Prevention | Workforce Strategy<br>Community<br>Engagement          |  |  |
| Developing the One Herefordshire transformation approach |                                     |  |  |  |

# Looking after our money

## **Statutory basis**

The Trust has fulfilled its responsibilities under the National Health Services Act 2006 for the preparation of the financial statements in accordance with the Manual for Accounts and the International Financial Reporting Standards which give a true and fair view in accordance therewith.

## **Financial breakeven**

In 2022/23, the Trust delivered a surplus of £5.4m. Once adjustments for the reversal of impairments and donations are accounted for, this equates to an adjusted deficit of £6.51m.

## **Trust breakeven duty**

The Trust break even duty is calculated based on the retained Surplus/(Deficit) for the year adjusted for asset impairments and revaluations and the impact of donated assets and capital grants received. There was also a small impact relating to centrally held and issued inventory linked to COVID-19.

#### 2022/23 Income Sources (£m)

The adjusted retained deficit was -£6.5m. The outturn was a marginal improvement on the Trust's financial plan.

# Cost productivity improvement programme (CPIPs)

The Trust delivered £8.8m of savings from a broad range of best value for money, pay and non-pay saving initiatives.

This was against a plan of £11.8m. £3.5m of the savings were delivered recurrently with a resulting benefit in future years.

## **Resources – Income and Expenditure**

The Trust generated income of £330m during 2022/23. The first pie chart identifies income received from different sources for health related activity. The largest share of income is derived from Clinical Commissioning Groups (CCG) and successor ICB's. The primary source of income was from NHS Herefordshire and Worcestershire CCG/ICB.

- Clir NH Loc We Co Edi Go Otr
  - Clinical Commissioning groups £240.4m
  - NHS England and other NHS £36.4m
  - NHS Trusts/FTs £7.9m
  - Local authorities £2.6m
  - Welsh NHS bodies £23.3m
  - Contributions to expenditure DHSC inventory £0.8m
  - Education, training and research £7.5m
  - Government grant funded income £4.4m
  - Uther £7.6m

#### 2022/23 Annual Expenditure (£m)

- Other £3.1m
- Staff £207.9m
- Supplies and services £35m
- Establishment £7.7m
- Transport £1.2m
- PFI Service Costs £15.6m
- Premises £7.4m
- Depreciation and impairments - £2.7m
- Insurance £6.4m
- Drugs £29.2m
- Finance costs and PDC Divs - £9.2m

# Investing in our future

# Shell of new elective hub begins to reshape County Hospital skyline

# Our new elective hub is beginning to take shape and starting to dominate the skyline at the back of the County Hospital.

The new £23 million elective hub is expected to open its doors to patients early next year, and is one of 50 which are being built across the country to help tackle the backlogs caused by COVID-19 and will offer patients quicker access to day case procedures.

It will help the Trust speed up elective surgeries and reduce waiting lists.

The types of procedures that will be carried out in thge hub include day case surgeries such as Ear, Nose and Throat, cataracts and minor operations.

The two-storey centre will house assessment rooms, pre-op waiting rooms, two specialist operating theatres, a dedicated cataract suite for eye operations, recovery bays and associated facilities including a reception and staff offices. It's facilities will effectively be ring-fenced to allow elective surgery to continue as normal, even when the Trust is experiences pressures across other parts of its services.



# Going greener, faster, at the County Hospital

With fuel rocketing in price, and the global climate emergency, the good news is that during last winter, we have been able to switch over to new fossil-fuel free green heating in some of the buildings on the County Hospital site.

This puts the Trust at the forefront of national requirements for Trusts to reduce their carbon footprints and means the Trust is one of the greenest Trusts in the UK.

The new ground source heat pump, which is fed by 47 boreholes that go 200m deep on the County Hospital site, is able to keep two of the buildings warm without the use of fossil fuels for the first time.

The even better news is that plans to convert the whole of the hospital site into a fossil-free fuel zone are progressing following a successful bid for a further £21 million of government money. This will allow the Trust to install more ground source heat pumps on the site – a move which is expected to further reduce the amount of carbon produced to heat the hospital by around 97 per cent – equivalent to saving 3,715 tonnes of carbon a year from going into the atmosphere.

New corridor links main building to new ward block

Our new three-warded block has been open for more than a year, and we've finally replaced the temporary tented corridor linking it to the main hospital building.

The previous tented corridor to give access to the new ward



block – fondly nicknamed as the polytunnel by staff – was finally taken down in Spring when the new corridor came into use.

## Green light for Community Diagnostic Centre

This spring we were informed that our case for a £16.5 million community diagnostic centre has been approved.

Work is now underway to put together a robust business case to support such a facility in Hereford city which has the potential to bring a host of benefits to our patients.

## New Education Centre

Excitement is growing over the prospects of a new Education Centre on the County Hospital site.

The building, which will be located on land next to the Gwyndra Downs building, would house a lecture theatre, the PGMC and a range of rooms which would also be available for the local community to use. We're grateful to Herefordshire Council's support for the plans and a major fundraising initiative is getting underway to secure funds for the building which will provide a state-of-the-art training facility.



# **Our focus for 2023/24**

# Objectives 2023/24

#### QUALITY

Reduce infection rates by delivering improvements to our cleanliness and hygiene regimes
Reduce discharge delays by working in a more integrated way with One Herefordshire partners

 Reduce discharge delays by working in a more in through the Better Care Fund (BCF)

Reduce waiting times for admission for patients who need urgent and emergency care by reducing demand and optimising ward based care

#### DIGITAL

Reduce the need to move paper notes to patient locations by 50 per cent through delivering our Digital Strategy

Optimise our digital patient record to reduce waste and duplication in the management of patient care pathways

#### SUSTAINABILITY

Reduce carbon emissions by delivering our Green Plan and launching a green champions programme for staff

 Increase the influence of One Herefordshire partners in service contracting by developing an agreement with the Integrated Care Board that recognises the responsibility and accountability of Herefordshire partners in the process

#### WORKFORCE

 Improve recruitment, retention and employment opportunities by implementing more flexible employment practises including the creation of joint career pathways with One Herefordshire partners

Develop a five year "grow your own" workforce plan

#### PRODUCTIVITY

Increase theatre productivity by increasing the average numbers of patients on lists and reducing cancellations

Reduce waiting times by delivering plans for an elective surgical hub and community diagnostic centre

#### RESEARCH

• Improve patient care by developing an academic programme that will grow our participation in research, increasing both the number of departments that are research active and opportunities for patients to participate

## **CQC** report



Wye Valley NHS Trust is registered with the Care Quality Commission (CQC) which monitors, inspects and regulates all health services to ensure they meet fundamental standards of quality and safety.

In October 2022 there was a focused inspection of medical and surgical services.

This inspection was focused on revisiting issues found at a previous inspection in 2020, which meant the CQC had issued a Section 29a notice. This happens when there are issues of concern that require immediate action.

A re-inspection would normally happen earlier however this was prohibited by the pandemic. The focused inspection rated Surgical services as 'requires improvement', an improvement from 2020 when the service was rated 'inadequate'. In both the 'Safe' and 'Well led' domains, the CQC rated surgical services as 'requires improvement'.

## UV light cocoon used to treat jaundice babies

Last year we used a special cocoon which bathes babies with jaundice in special light for the first time. The cocoon can be used at home and allows parents with premature babies to care for their new-borns in the comfort of their own home.





