

WEST YORKSHIRE ASSOCIATION OF ACUTE TRUSTS

ANNUAL REPORT 2024/25







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Introduction to the Committee in Common

The West Yorkshire Association of Acute Trusts (WYAAT) is part of the West Yorkshire Health and Care Partnership (WYHCP). It is an innovative provider collaborative (not an organisation) which brings together six NHS trusts across West Yorkshire and Harrogate (WY&H) to deliver joined up acute hospital services.

The six hospital trusts which make up WYAAT are:

- Airedale NHS Foundation Trust (ANHSFT)
- Bradford Teaching Hospitals NHS Foundation Trust (BTHFT)
- Calderdale and Huddersfield NHS Foundation Trust (CHFT)
- Harrogate and District NHS Foundation Trust (HDFT)
- Leeds Teaching Hospitals NHS Trust (LTHT)
- Mid Yorkshire Teaching NHS Trust (MYTT)

By working together as a partnership of hospital trusts, standardising and reducing duplication where appropriate, as well as sharing resources and staff, WYAAT is helping to address health inequalities for the 2.7 million people who live across WY&H, so that all patients can receive the same high level of care, no matter where they live. Our member trusts are committed to ensuring our work is clinically, financially, and environmentally sustainable, and focused on addressing inequality in access, outcomes, and experience.

Our trusts are all key partners in their Places (Bradford District and Craven, Calderdale, Harrogate and District, Kirklees, Leeds and Wakefield), and deliver some priorities on behalf of the <u>West Yorkshire Integrated Care Board (WYICB)</u>, which is responsible for connecting health and care services across their geographical footprint, to improve people's health and wellbeing and reduce health inequalities across the region.

The 2024/25 Annual Report for WYAAT gives an overview of the Collaborative's progress and performance over the last 12 months, between April 2024 – March 2025. Recognising 2024/25 has been a challenging year for the NHS, the achievements detailed within this report could not have been accomplished alone and demonstrate why collaboration between our trusts remains fundamental to our success.



The Five-Year Strategy

Our <u>WYAAT Five Year Strategy</u> (2024-2029), which launched in May 2024, defines how our trusts work together to achieve our vision, focusing on six priority areas – service delivery, workforce, infrastructure, productivity and efficiency, research, innovation and improvement and ways of working.

In developing the Strategy, we aim to:

Signal to our partners our commitment to leading key priorities and working together effectively to deliver the best outcomes for our communities

Demonstrate to our **patients** how we will work together to provide high quality services and tackle inequality in access, outcomes, or experience

Show our **teams** they have permission and support to collaborate across organisations and create networks, and how working together can support their patients, services, and career development

Give our leaders clarity on where we collaborate purposefully as WYAAT, and structures and support in place to enable this

Since launching our Strategy, we have ensured that our six pillars remain deeply embedded in all work we have undertaken, and this annual report keeps us accountable for what we set out to achieve in our 2024/25 Annual Plan.

WYAAT and collaboration are part of each trust's everyday business, with teams working together to enable the best experience for patients and our workforce. The achievements detailed within this report could not have been accomplished alone and demonstrate why collaboration between our trusts remains fundamental to our success.











Chair Airedale NHS Foundation **Trust**





Foluke Ajayi Chief Executive Airedale NHS Foundation Trust



Sarah Jones Chair **Bradford Teaching Hospitals** NHS Foundation Trust



Mel Pickup Chief Executive **Bradford Teaching Hospitals** NHS Foundation Trust







Brendan Brown Chief Executive Calderdale and Huddersfield **NHS Foundation Trust**

Undan







Jonathan Coulter **Chief Executive** Harrogate and District NHS **Foundation Trust**

Sarah Armstrong Chair Harrogate and District NHS **Foundation Trust**







Professor Phil Wood Chief Executive **Leeds Teaching Hospitals NHS Trust**



Leeds Teaching Hospitals **NHS Trust**





Keith Ramsay Chair Mid Yorkshire Teaching NHS Trust

Len Richards Chief Executive Mid Yorkshire Teaching **NHS Trust**



SERVICE DELIVERY





Service Delivery

Service delivery programmes:

<u>Neurology</u> – Our neurology programme aims to deliver sustainable, equitable and outstanding neurology services as close to where people live as possible. The programme covers all aspects of urgent, general and specialist neurology services, with specific focus on out of hours, diagnostic tests including neurophysiology, and aligned services such as neurorehabilitation.

<u>Non-Surgical Oncology (NSO)</u> - Our NSO programme will implement a new and more robust model for the delivery of NSO services across WY&H, providing long-term safe, sustainable, high quality and equitable levels of patient care. NSO services provide drug and radiotherapy treatments for cancer patients and manage the care of patients who become unwell because of complications of treatment, or as a consequence of the patient's cancer progressing.

Integrated Stroke Delivery Network (ISDN) – The ISDN programme aspires to establish a seamless, high-quality stroke care system across the region, ensuring that patients receive timely, effective, and evidence-based care from the moment a stroke occurs, through to rehabilitation and long-term recovery. By connecting services across primary, secondary, and tertiary care, as well as prevention, pre-hospital care, rehabilitation, and community support, the Network seeks to improve patient outcomes and reduce disparities in stroke care.

<u>West Yorkshire Vascular Network (WYVaS)</u> - WYVaS brings together arterial and non-arterial centres across West Yorkshire into a single network. Arterial centres undertake complex surgery and have inpatient services, whereas non-arterial centres provide outpatient and day case services. The single network is split into two sectors - WYVaS East (across LTHT and MYTT) and WYVaS West (across BTHFT, ANHSFT and CHFT). By working together, the hospital trusts ensure that patients receive the same, high quality vascular care.

<u>Planned Care</u> – The planned care programme's primary focus is the recovery of waiting lists after the COVID-19 pandemic. By increasing capacity across our trusts, sharing best practice and workforce, and creating a consistent approach to prioritisation, we aim to ensure all patients have equity of access and receive the right care, at the right time, in the right place.



Achievements for 2024/25

- Secured a contract extension for AI software to support detection of strokes on X-rays.
- Developed a range of digital tools to understand performance and identify improvement opportunities within stroke services.
- Launched the 'All Things Stroke' website to provide essential postdischarge support for patients, their families, and carers.
- Expanded our electronic patient reported outcome measure (ePROM) pilot within NSO services to cover additional tumour sites, increasing the number of hospitals which offer this technology. ePROM services reduce the average number of times patients are required to attend hospital as patients can input their own data at home.
- Implemented the myMobility Care Management Platform at BTHFT and CHFT to support patients preparing for and recovering from surgery, by providing information, helpful reminders, and scheduled exercises via an app on their smartphone.
- Reduced the overall waiting list for elective care by 4%, with an 4% reduction for adults and a 9% reduction for children and young people.
- Organised 'super clinics' across the trusts, namely within ear, nose & throat (ENT), gynaecology and urology services, enabling almost 800 patients to be seen sooner, with over 50% being discharged following their appointment.
- Increased patient initiated follow up (PIFU) rates from 2.6% to 3.6%. PIFU allows the patient to choose when they need a follow up appointment, based on their symptoms and individual circumstances.
- Utilised the WYAAT Portability Agreement across WYVaS and neurology services to allow staff to move across trusts to provide mutual aid and help reduce waiting lists.
- Successfully integrated NSO services across CHFT and MYTT, standardising work and improving patient pathways.
- Worked with the Yorkshire Ambulance Service (YAS) to revise the stroke pathway to improve regional access and reduce inequalities.
- Worked jointly with the WYICB to enable the safe delegation of commissioning responsibilities for specialised services from 1 April 2025.



Service Delivery

Putting the patient first

- Increased the use of chemotherapies within our 'at home' drug offer, enabling medicines to be administered orally or via subcutaneous injection at home, providing a better patient experience and improving access to care.
- Engaged with over 1,500 West Yorkshire residents to collect feedback on what matters to them regarding NSO services, to inform the future model and business case.
- Updated the information provided on trust webpages for patients preparing for surgery, to help them to recover sooner and be less likely to have complications or require further care.
- Supported almost 2,000 patients with an eye condition, namely cataracts, to improve their physical or mental health through accessing the Royal National Institute of Blind People's 'Waiting Well' team.

Utilising the WYAAT Portability Agreement to support neurology services

Neurology patients across CHFT are now able to receive care sooner, with the support of LTHT clinicians. Utilising WYAAT's portability agreement, which enables clinicians to move between WYAAT sites, senior neurology clinicians at LTHT have been able to work within CHFT's neurology service one day a week, offering vital support to help CHFT reduce their waiting lists.

The neurology service treats conditions including epilepsy, MS, Parkinson's disease, movement disorders and migraine.

Clinicians have been utilising the portability agreement officially since June 2024 across different areas, enabling CHFT to increase capacity in their clinics and work through follow-up appointments and inpatient reviews at a faster pace, without comprising care or quality.

Working collaboratively in this way has enabled the partnership to reduce waiting lists by 25%.

This is a prime example of how collaboration across WYAAT can significantly impact patient care and boost staff morale. Colleagues across the trusts are showing that by working together, we can make bold strides towards positive change for everyone.





Workforce

Achievements in 2024/25

- Delivered the second cohort of the Senior Leadership Programme (SLP), aimed at colleagues aspiring to be executive directors. This year, 20 participants completed the Programme, including colleagues from YAS, mental health, learning disability and autism providers, and community providers across WY&H.
- Reviewed our current occupational health offer across our trusts, to help us to make resources more sustainable and equitable to all WYAAT staff.
- Completed preparatory work to pilot a 'collaborative staff bank' within certain pressured services in 2025.
- Developed, approved, and adopted an Advanced Practice Framework across WYAAT to provide a consistent governance and support framework for those working in advanced practitioner roles in all WYAAT trusts.
- Following the official opening in March 2024, the West Yorkshire Regional Training Centre for Endoscopy has now completed its first year of operating, providing clinicians with access to consistent and streamlined teaching, allowing trainees to reach accreditation sooner. The Centre has run eight courses and trained 32 colleagues including clinical endoscopists, gastroenterological trainees and surgical trainees.

Benefits for staff

- Offering leadership development to our staff shows that we value and support them in their career journeys.
- SLP members reported that the Programme had a positive impact on their personal growth, leaving them with a deeper understanding of systemworking and advancement in leadership development.
- By focusing on improving our occupational health offer, we are showing our dedication to supporting staff while at work and to retaining their skills and expertise within WYAAT.
- We are developing shared frameworks and approaches to grow and retain our advanced practitioner and medical associate professional workforce as core members of our multidisciplinary clinical teams.
- Providing access to a collaborative staff bank for specific groups of staff will offer more choice, geographical ease, and a more streamlined process to take on additional work for those who choose to do so.
- Focusing on improving training within endoscopy and WYVAS has enabled clinicians across WYAAT to enhance their skills and develop locally, keeping talent within the region.



The Senior Leadership Programme

The <u>SLP</u> aims to enhance system learning for senior leaders on the career path for executive roles across our WYAAT by instilling a pragmatic understanding of system thinking. It comprises of five immersive components: **online modules, executive mentorship, system learning events, collaborative placements** and **facilitated catalyst sessions**.

While member organisations provide leadership development individually, these typically take place within internal teams, and often lack cross-sector and inter-professional exposure. Our provider collaborative structures uniquely enables extended learning and experience.

Our first Programme launched in April 2023 and, based on its success, was relaunched in April 2024 with a broader cohort including colleagues from West Yorkshire Mental Health and Learning Disabilities Collaborative, YAS, and West Yorkshire Community Collaborative.

"My biggest learning is that there are common challenges and problems - reassuring that we are not alone in these challenges and there is clear benefit in collaboration across the system."

"The experience has been fantastic! The networking has been really beneficial and it will continue to be as my career develops."







Infrastructure

Infrastructure programmes:

<u>Yorkshire Imaging Collaborative (YIC)</u> - The YIC is a radiology transformation programme, enabled by technology. The Collaborative aims to provide a technically connected radiology service across our six trusts, by standardising the software utilised across our hospitals.

<u>Pharmacy Aseptics</u> - Our pharmacy programme aims to deliver efficiencies in pharmacy aseptic services, which provide controlled environments to prepare ready-to-administer, injectable medicines. There is currently limited capacity within aseptic services across the NHS. However, there continues to be a growth in demand for aseptic products such as chemotherapy, immunotherapy, and intravenous antibiotics. To continue to meet this growing demand to ensure patients receive critical treatment, the capacity across the region must also expand.

<u>Pathology</u> - Our pathology network across WYAAT aims to standardise processes, consolidate routine testing from fewer locations, improve turnaround times for test results, and create service efficiencies. The Network is driven by the need to address workforce sustainability, cost, price, service variation, and increasing demand.

<u>Community Diagnostic Centres (CDCs)</u> - The establishment of CDCs was part of a national programme to improve efficiency, access and reduce delays for patients. CDCs are community-based, elective diagnostic centres with new pathways offering various tests for patients including CT, MRIs, X-rays, ultrasounds, phlebotomy, respiratory and cardiology. They support the integration of primary, community and secondary care and provide an opportunity to improve population health outcomes, productivity and efficiency, taking demand away from secondary care.



Infrastructure

Achievements in 2024/25

Technology

- We continued to implement a network-wide Laboratory Information Management System (LIMS) across our pathology services, enabling trusts to share work across laboratories and provide much-needed technical resilience. The single system is now fully live in three of the WYAAT trusts (ANHST, BTHFT and HDFT) and partially live in a further two (LTHT and MYTT). The full deployment will be completed in 2027.
- We delivered an enhanced ICE OpenNet functionality ensuring visibility of pathology results across all WYAAT trusts.
- Work progressed to implement the YIC shared reporting solution, to enable patient images to be both viewed and reported upon across our hospitals, as well as the CDC based in Eccleshill.
- Successfully implemented an Artificial Intelligence (AI) tool within Chest X-rays, to support quicker diagnosis of lung cancer, chest infections (Sepsis) and tube and line safety across five of our trusts.
- Our NSO teams successfully agreed requirements for and procured a common chemotherapy prescribing system which will support the delivery of a networked model across NSO services.

Estate

- The newly constructed pathology Centre for Laboratory Medicine in Leeds is now partially operational, equipped with state-of-the-art technology procured through the joint managed service contract and will be fully operational in 2025.
- The site and lead contractor has been secured to develop the new aseptic hub for the preparation of large quantities of standardised pre-prepared medicines to our hospitals. Production has commenced from the existing site in smaller numbers to deliver benefits to staff and patients ahead of the completed construction of the hub.
- CDCs are now operational and providing local access to patients for a range of diagnostic tests in six sites across West Yorkshire.

Putting the patient first

• Implementing standardised pathology testing across our region ensures reliable and accurate test results for all patients, regardless of where they receive care.



Infrastructure

- The ability to access results from across our trusts reduces the requirement for patients to repeat tests and supports faster diagnosis, treatment, and discharge.
- Centralising routine testing using high-tech equipment will allow our laboratories to operate more efficiently, reducing patient waiting times.
- Creating centralised hubs allows specialists to focus on complex cases, leading to better patient diagnoses and care plans.

Benefits for staff

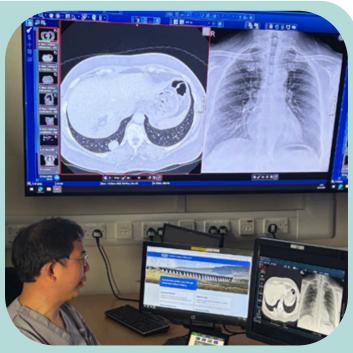
- The new aseptic manufacturing hub will provide nursing staff with ready-to-administer injectable medicines, addressing unmet needs and freeing up time for direct patient care.
- Investment in digital slide scanning technology allows staff to review and report histopathology slides from any location. It also enables staff to upskill and develop their skills to become more proficient and experienced practitioners.
- Our shared imaging platforms allow specialists to consult with each other remotely on patient images, improving diagnostic accuracy.



Artificial Intelligence (AI) within the YIC

YIC has successfully implemented transformational AI imaging software in five of our six trusts, to help diagnose patients with life-threatening diseases, including lung cancer, more quickly.

Every year, approximately 400,000 chest X-rays are taken across our trusts; all of which require interpretation by specialist radiologists or reporting radiographers. The software acts like a second pair of eyes for clinicians, allowing them to prioritise the review of



chest X-rays identified as a suspicious or requiring further investigation.

Funding for this technology was secured through <u>NHS England's Al Diagnostics Fund (AIDF)</u>, which was established to accelerate the deployment of Al imaging and decision support tools to help diagnose lung cancer sooner.

The chest X-ray software, developed by Annalise.ai, can detect up to 124 potential findings on chest X-rays in under a minute, streamlining the reporting process.

Chest X-rays provide clinicians with useful information regarding the possibility of lung cancer and infections such as pneumonia or empyema, as well as helping to rule out other conditions such as fluid in the lungs or complications caused by misplaced feeding tubes. The software provides clinicians with comprehensively annotated images to help with clinical decision making.





Productivity and Efficiency

Productivity and efficiency programmes:

<u>Procurement</u> - The procurement programme works with all major providers of NHS services in the West Yorkshire Integrated Care System (WYICS) to identify opportunities for savings and collaboration, whilst also focusing on sustainability and innovative opportunities utilising relationships with local suppliers. The programme is working towards the <u>NHSE target to deliver a net zero NHS by 2050</u> working with sustainable suppliers and purchasing products that are more environmentally friendly.

Achievements in 2024/25

- This year has been the strongest in WYAAT's history for savings delivery, with £2.3 million delivered through purchasing goods and services together. Our trusts collaborated to deliver 56 projects across a range of clinical and non-clinical services, including food, protective equipment, and medical devices.
- We supported several projects to deliver improvements in patient care, including the <u>AposHealth</u> pain management system, which supports patients with chronic knee pain.

Addressing the financial challenges

WYAAT commissioned an external review in summer 2024, to ensure we are working effectively and to ensure we deliver our financial plans. The review confirmed there is a strong focus on the governance, systems, and processes to ensure effective financial management across the member trusts, whilst also highlighting opportunities to address both the in-year and longer-term financial challenges. Where opportunities for improvement and increased collaboration and consistency were identified, action plans have been put in place to respond to the recommendations of the report.



Productivity and Efficiency

All WYAAT organisations monitor the delivery of their action plan with assurance and oversight provided by Trust Boards, and scrutiny provided by their respective finance committees. Action plans are also shared and discussed through WYAAT to share best practice and support mutual accountability.

Elective productivity

Through the planned care programme, WYAAT trusts have worked together to improve on performance against national standards and other initiatives, enabling our trusts to see more patients in our core capacity. This has included dedicated work on theatre utilisation, outpatient clinic templates, PIFU, day case rates, and missed appointments.

Putting the patient first

- We work with stakeholders across all trusts to ensure goods and services are fit for purpose and of the highest quality for our patients.
- By standardising products across our trusts, we ensure that patients receive consistent care across our hospitals.
- Our hospitals have worked together through our planned care programme to collectively reduce the number of missed appointments across our region from 7.35% to 6.3%. This means more patients attended their appointment as planned.

Benefits for staff

- Our procurement programme successfully obtained 72 places on a national programme to enable staff to gain professional training via the Chartered Institute of Logistics & Transport.
- By standardising some of the products we use across our six trusts, we are making it easier for staff to work across our hospitals, as some equipment will already be familiar to them, removing the need to repeat training.



RESEARCH, INNOVATION & IMPROVEMENT





Research, Innovation & Improvement

Achievements in 2024/25

Our <u>Five-Year Strategy</u> outlines our commitment to work collaboratively on research, innovation, and improvement. To deliver on this commitment, we have:

- Established the WYAAT Research, Innovation, and Improvement Network
- Appointed a CEO Lead and two executive leads as co-chairs of the Network
- Undertaken a baseline survey exercise across our trusts to understand how research, innovation, and improvement are embedded in work locally, as well as identifying further opportunities for collaboration.
- Agreed the following priority areas of focus:
 - Improving diversity in research, innovation, and improvement (workforce)
 - Improving diversity and community engagement in research
 - Embedding research, innovation, and improvement as core business
 - Sharing and maximising our assets and infrastructure to enable research, innovation, and improvement
 - Shared projects new projects and scaling existing work
 - Using our data most effectively
- Hosted our first WYAAT <u>'Leading Research and Innovation through Collaboration' Conference</u> in October 2024, attended by over 100 colleagues with an interest and/or active involvement in research.
- Focused on oncology research across WYAAT to support the collaborative work in NSO.

Putting the patient first

- Ensuring patients have equitable access to research and clinical trials across our trusts.
- Positioned our trusts at the forefront of cutting edge research and new innovations to enhance patient care and outcomes.

Benefits for staff

- Providing greater opportunities to engage in research, innovation, and improvement for a wider range of colleagues.
- Supporting staff retention by enabling access to research, innovation, and improvement opportunities.



'Leading Research and Innovation through Collaboration' Conference

In support of the research, innovation, and improvement pillar of our <u>WYAAT Five Year Strategy</u>, in October 2024 we hosted our inaugural <u>'Leading Research and Innovation through Collaboration'</u> conference.

The event provided an opportunity for over 100 WYAAT colleagues to network, share best practice and successful approaches to research, innovation, and quality improvement taking place across the Collaborative. Those in attendance either lead or actively participate in research, innovation, and quality improvement including doctors, nurses, midwives, allied health professionals, pharmacists, and healthcare science colleagues.

The day was broken up into a mixture of keynote speaker presentations as well as panel sessions where colleagues were given the opportunity to engage in discussions based on their own interests and subject areas. The session topics included:

- Redefining innovation in relation to research and quality improvement in the context of day-to-day clinical practice
- Collaborative research what are the practical steps to enable the wider uptake of research across WY&H?
- Influencing research and innovation who and how can we engage wider stakeholders including industry?
- How do we improve participation in research of underrepresented community groups?
- How do we improve participation in research and innovation for all healthcare professionals?
- Embedding research, innovation, and improvement into day-to-day clinical practice



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Clinical Networks

Our 21 <u>clinical networks</u> are fundamental to supporting continuous improvement, ensuring clinical engagement in the work of WYAAT, and enabling a culture of collaboration across our trusts.

Each network has a set of objectives which support the delivery of the <u>WYAAT Five-Year Strategy</u> and Annual Plan. Each network consists of secondary care clinicians, as well as health and care professionals from primary and community services, in order to seek opportunities to improve the full patient pathway.

Surgical	Diagnostics & support services	Medical
 Ophthalmology General surgery Urology Peri-operative care Trauma & orthopaedics Gynaecology Ear, nose, throat Children & young people (surgery) Vascular OMFS 	 Outpatients Pathology: Biochemistry Histopathology Microbiology Radiology Healthcare Science Council 	 Dermatology Gastroenterology endoscopy Stroke Clinical psychology Clinical haematology Neurology Rheumatology

Each clinical network has been tasked with focusing on improving patient access and service productivity and efficiency, as well as ensuring any new ideas are agreed collaboratively, informed by best practice.



Numerous clinical networks are exploring common themes, including:

- Prioritising High Volume, Low Complexity procedures an initiative launched in 2021, designed to help drive down waiting lists for elective surgery.
- Increasing the use of PIFU an initiative which gives patients and their carers the flexibility to arrange their follow-up appointments as and when they need them, freeing up appointments for those most in need.
- Implementing the <u>Further Faster Programme</u> to help trusts deliver rapid clinical transformation to reducing waiting times for our longest waiting patients.
- Optimising patient pathways, including focusing on prevention to help patients stay well for longer and keeping them out of hospital.
- Reducing unwarranted variation in access, experience, and outcomes for patients, using clinical benchmarking data through sharing best practice and implementing pathway improvements.



Finance

By working collectively across our six trusts, this year has been the strongest in WYAAT's history for savings delivery, with £2.3 million delivered through purchasing goods and services together alone. The overall savings delivery across trusts is £9.6m, with £6.1m of this cash releasing and £3.5m in contract management and cost avoidance.

The budget set for the financial year 2024/25 was £4.4m. This was funded from contributions from the six member trusts and additional funding from the WYHCP for stroke and planned care. Additional funding was received for hosting the ICS procurement programme, from the WY&H Cancer Alliance and from NHSE to support the implementation of diagnostic networks.

Total income received for the year was higher than planned at £4,5m, due primarily to additional funding received from NHSE to support Al Diagnostics imaging technologies. Actual expenditure for the year was £4.5m delivering an underspend of £5k.

The table below provides a summary of the 24/25 position. Underspends due to delays in recruitment and during the year have offset additional cost associated with the rollout of LIMS.

Programme	24/25 Budget	Actual	Variance
Core WYAAT trusts	£2,048,132	£2,048,132	£0
Other sources	£2,348,971	£2,410,743	£61,812
Total income	£4,397,103	£4,458,915	£61,812
Core PMO	-£2,894,453	-£2,147,672	£746,781
Radiology	-£281,269	-£277,326	£3,943
Pathology	-£188,387	-£273,587	-£85,200
Procurement	-£133,802	-£165,426	-£31,624
Vascular	-£210,686	-£222,567	-£11,881
Stroke	-£152,250	-£165,185	-£12,936
Planned care	-£130,250	-£82,880	£47,369
Clinical network leads	-£231,006	-£192,317	£38,689
Cancer Alliance	-£175,000	-£175,000	£0
Other inc. system	£0	-£751,069	-£751,069
Total spend	-£4,397,103	-£4,453,030	-£55,927
Net I&E Position	£0	£5,885	£5,885



Glossary of Abbreviations

Artificial intelligence	AI
Airedale NHS Foundation Trust	ANHSFT
Bradford Teaching Hospitals NHS Foundation Trust	BTHFT
Community Diagnostic Centres	CDC
Calderdale and Huddersfield NHS Foundation Trust	CHFT
Electronic patient reported outcome measure	ePROM
Harrogate and District NHS Foundation Trust	HDFT
Integrated Stroke Delivery Network	ISDN
Laboratory Information Management System	LIMS
Leeds Teaching Hospitals NHS Trust	LTHT
Mid Yorkshire Teaching NHS Trust	MYTT
NHS England	NHSE
Non-Surgical Oncology	NSO
Patient initiated follow-up (PIFU)	PIFU
Senior Leadership Programme	SLP
West Yorkshire and Harrogate	WY&H
West Yorkshire Association of Acute Trusts	WYAAT
West Yorkshire Heath and Care Partnership	WYHCP
West Yorkshire Integrated Care Board	WYICB
West Yorkshire Integrated Care System	WYICS
West Yorkshire Vascular Service	WYVaS
Yorkshire Ambulance Service	YAS
TOTASTITE ATTIBUTATION SELVICE	TAS

