







Harrogate Integrated Facilities Integrated Board Report



HIF Senior Manager Team (SMT)

December 2022

Harrogate Integrated Facilities is a trading name of Harrogate Healthcare Facilities Management Limited, company number 11048040, registered office address Harrogate and District NHS Foundation Trust, Third Floor, Strayside Wing, Lancaster Park Road, Harrogate HG2 7SX Registered in England and Wales

Company Highlights For Quarter 3

What's happened so far in Quarter 3...

- Dedicated HIF Recruitment event took place on 24th November 2022 at Cedar Court Hotel, Harrogate with a total of 48 applications across HIF services
- We welcomed xxxxxxxxx to HIF as Head of Facilities
- Successfully recruited to the new role of 'Security and Car Park Manager'
- Awarded a 5* rating following the Environmental Health Officer visit to Catering in October
- Staff survey and strategic objectives sessions took place on 21st /22nd /25th
 November and were well attended and highly successful
- Business continuity exercise taken place with all services
- Thank you to the HIF Catering Team who served approx. 2500 Christmas dinners to HDFT and HIF Colleagues
- KITE awards took place on 25th November with the below winners:



HIF Team of the Year
Catering – Winner
Grounds Team – Highly commended

Still to come in Quarter 3...

- Estates and Catering workforce structure underway
- Development of our Business Plan for 2023/24
 - Progressing with a HIF Nomination for the 2023 HEFMA Awards
- CQC readiness and preparation actions underway









Sustainability Update for Quarter 3...

- Our Sustainability Board is now established
- Communications strategy in development with HDFT Communications team and external partners
- Contacts established with other Trusts who have sustainable mandatory training modules to share with HDFT/HIF colleagues
- Active membership of the Humber and North Yorkshire Health and Care Partnership sustainability group
- Travel Plan complete and signed off
- Signed up to Modeshift Stars Centre of Excellence for the delivery of Effective Travel Plans
- Established partnership with local bus companies
 Transdev and Connexions. Staff discount is being
 finalised and exploring links to their apps from our staff
 app.
- Ability for new staff to have taster bus ticket via the app
- Transdev to assist in updating the live travel boards in the hospital
- Proposal received from a local company to provide cycling confidence / proficiency training and maintenance workshops.
- Existing car share scheme and "yellow permit" (easy / frequent access – 3 hours) evaluated.
- Bid for ICB funding for a "carbo" e-bike to be trialled ideally embedded within a service or used to promote active travel







	KDI NI-	KDI December	0					
Service Area	KPI No	KPI Descriptor	Green	Amber	Red	Sep-22	Oct-22	Nov-22
	1	Staff Turnover (Headcount)	10%	10-15%	>15%	15.91%	23.84%	23.65%
General	2	Appraisal (YTD)	>75%	>74-50%	<49%	24.06%	16.49%	15.17%
General	3	Core Skill (YTD)	>90%	89-60%	<60%	83%	84%	83%
	4	Absenteeism	<4.5%	4.5-7%	>7%	7.77%	7.60%	7.89%
Estates Management		Authorised Engineer (AE) Audits conducted at least annually as per schedule						
	1	Water	<12m	>12m <13m	>13m	Dec-21	No data	21-Dec
	2	Electrical	<12m	>12m <13m	>13m	Aug-21	No data	22-Jul
	3	Vent	<12m	>12m <13m	>13m	Dec-21	No data	21-Dec
	4	Medical Gas	<12m	>12m <13m	>13m	Aug-21	No data	22-Aug
	5	Decontamination	<12m	>12m <13m	>13m	Jul-21	No data	22-Jul
	6	Fire Safety	<12m	>12m <13m	>13m	Audit has commenced August 22. Report expected Sept / October 23	No data	AE to complete in next 3 months
	7	Lifts	<12m	>12m <13m	>13m	Aug-22	No data	21-Aug
	8	STATUTORY PPM Schedule achieved (in month)	>=95%	90-94%	<90%	79%	No data	To review
	9	MANDATORY PPM Schedule achieved (in month)	>=90%	89-86%	<86%	66%	No data	To Review
	10	GENERAL PPM Schedule achieved (in month)	>=85%	84-80%	>80%	0%	No data	To Review

^{**}Please note that a KPI Remedial Action Plan has been completed for any KPIs with one red KPI or two amber KPIs consecutively**







Service Area	KPI No	KPI Descriptor	Green	Amber	Red			
GETTIGE ATEU	TAT THE		Green	Amber	nou	Sep-22	Oct-22	Nov-22
	1	5 year audit of clinical areas conducted	>=75%	74-65%	<65%	84%	No data	84%
Waste Management	2	Fully completed and compliant Clinical Waste Consignment and Transfer Notes	>=90%	90-80%	<80%	85%	No data	TBC with Mitie, review to be carrie dout on current process
General Office	1	Provision of a General Office service from 9.00am-4.30pm Monday to Thursday. 9.00am to 4pm on Friday	PASS	N/A	FAIL	PASS	PASS	PASS
Helpdesk	1	Provision of help desk service from 8am- 4pm Monday to Friday	PASS	N/A	FAIL	PASS	PASS	PASS
	1	Provision of monthly energy consumption report	PASS	N/A	FAIL	PASS	PASS	Pass
Energy Management	2	Carbon Target (measured annually against previous year)	0%	1-5% increase	>5%	Pass on CEF Portal, update provided for next meeting	No data	Pass, on CEF Portal, update provided for next meet.
	1	STATUTORY PPM for external areas Schedule achieved (in month)	>=95%	90-94%	<90%	Working to a new planned maintenance programme from August 2022. SLA updated to reflect a new set of KPI to be added to this report	No data	Working to a new planned maintenance programme from August 22. SLA updated to reflect a new set of KPI to be added to this report
Grounds Maintenance	2	MANDATORY PPM for external areas Schedule achieved (in month)	>=90%	89-86%	<86%	Working to a new planned maintenance programme from August 2022. SLA updated to reflect a new set of KPI to be added to this report	No data	Working to a new planned maintenance programme from August 22. SLA updated to reflect a new set of KPI to be added to this report
	3	GENERAL PPM for external areas Schedule achieved (in month)	>=85%	84-80%	>80%	Working to a new planned maintenance programme from August 2022. SLA updated to reflect a new set of KPI to be added to this report	No data	Working to a new planned maintenance programme from August 22. SLA updated to reflect a new set of KPI to be added to this report

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Service Area	KPI No	VDI Descriptor	Cross	Amber	Red			
Service Area	KPI NO	KPI Descriptor	Green		Red	Sep-22	Oct-22	Nov-22
	1	Average stock levels delivered (aggregate monthly)	<=92%	91>=85	<85	103%	100%	100%
Linen Service	2	Laundry Quality				100%	98.62%	95.75%
	3	Linen Rejects	<=4%	>4%<=9%	>9%	0.70%		0.21%
	1	Achievement of EHO 5 star food safety rating (annual)	5 Star	4 star	<4 star	5 star	5 star	5 star
Catering Services	2	Achievement of food wastage target	<=10%	11-14%	>=15%+	5.91%	6.14%	6.20%
	3	Achieve at least the national average PLACE score for Catering elements	PASS		FAIL	2019	2019	2019
Portering and courier service	1	Routine patient movement - average completion times completed within 35-50mins	85-100%	65-84%	>65%	82%	82%	94%
	2	Items moves and routine task completion time - average completed within 120 mins	85-100%	65-84%	>65%	92%	89%	93%
	1	Achieve National Specification of Cleanliness (NSC) score (FR2)	>=95%	94-90%	<90%	97.99%	99.32%	99.15%
Domestic services	2	Total number of deep clean requests (activity based target)	500-750	751-900	901+	542	560	506
	3	Average response time to deep clean requests (24/7)	<=60 mins	>60min-90min	>90mins	45 mins	42 min	52 min
Cor park and traffic management	1	Car parking permits issued within 15 working days (WD) (subject to waiting lists and over subscription)	<=15 WD	15-18 WD	>=19WD	PASS	PASS	PASS
Car park and traffic management	2	Proximity cards issued within 15 working days (subject to waiting lists and over subscription)	<=15 WD	15-18 WD	>=19WD	PASS	PASS	PASS

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Service Area	KPI No	KPI Descriptor	Green	Amber	Red				
Service Area	KPINO	KPI Descriptor	Green	Amber	Red	Se	p-22	Oct-22	Nov-22
	1	Surgical instruments will be available for re-use: Theatres, DSU and on site clinics (non-critical)	24 hours	24-28 hours	>28 hours	Р.	ASS	PASS	PASS
	2	Surgical instruments will be available for re-use: Theatres critical (acute and trauma)	12 working hours	12-14 working hours	>14 working hours	Р.	ASS	PASS	PASS
	3	Surgical instruments will be available for re-use: Community clinics	7 days	>7 <9 days	> 9 days	P.	ASS	PASS	PASS
	4	Surgical instruments will be available for re-use: Flexible endoscopes	2 working hours	>2 -2.5	>2.5 working hours	P.	ASS	PASS	PASS
Sterile services	5	Surgical instruments will be available for re-use: Fast track	4.5 working hours	>4.5 working hours	>5 working hours			1	1
	6	The conformity compliance rate remains the same as or above the compliance	>99.36%	=<99.36%	<99.15%	99	.87%	99.80%	99.91%
	7	The inspection and packing room conforms to ISO Class 8	Class 8		Class 9	cla	ass 8	Class 8	Class 8
	8	Devices used on patients are not missed of scanning to the sterilisation process	<3	=>3	>5		0	0	0
	9	No unscheduled sharps are sent to service users	<1	1	>1		0	0	0
	1	All medical device deliveries not requested as urgent will be delivered within an hour daily	<1 hour	1 hour	>1 hr	O):15	0:14	0:14
Medical devices and equipment library	2	All medical device deliveries requested as urgent will be delivered within 20 minutes daily	<20 mins	>20 mins	>30 mins			1	
	3	Wards and departments (16 in total) will be checked and equipment collected twice daily	2	<2	0	P.	ASS	PASS	PASS
Pest Control	1	Call-out response time	72 hours	72-96 hours	>96 hours	P.	ASS	PASS	PASS

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Freedom of Information (FOI)

A HIF FOI log was developed in February 2022 to ensure the process and timely response of all FOI's was actioned. In addition the approval process was developed to ensure any responses were reviewed and approved by both the Deputy Director Estates and Facilities and Managing Director.

The Quality and Governance Lead manages the process.

During Quarter 3, there have been a total of 15 HIF-related FOI's

- 8 in October
- 7 in November
- 0 in December (to date)

3 are currently in the review stage and 12 have been responded to.







Internal Audit Actions and Plan for 2022-23

All HIF Outstanding Audit Recommendations for 2020-21 have now been actioned and closed. Confirmation in May 2022 from Internal Audit that there are no outstanding audit actions from 2020-21.

HIF have received the outcome of the 'Security Management - Compliance with NHS Violence Reduction and Prevention Standards' audit which took place in during 2021 and 10 recommendations to be actioned as part of the report. 7 actions have been closed and 3 are currently being action/developed and will be completed by February 2023.

The HIF Internal Audit Programme for 2022-23 has been agreed and is underway. The HIF Governance and Risk Internal Audit is now completed and the first draft report has been received with 'limited assurance'. Shared actions with HDFT and HIF have been agreed and work is underway to have all actions completed by March/April 2023.

The 2022 Contracts Management Internal Audit is currently underway.

Two follow-up audit reports on HIF 'Agency Use and Spend' and 'Food Supplies' have additionally taken place actions agreed to ensure assurance. Work is underway to action.







Risks

All HIF risks scored at a level 9 or above (high risks) have now been migrated to the Datix software and are monitored alongside the Trust's risks.

The level 9 and above risks are tabled in the next slides.

There are currently 13 high risks identified for December 2022.

From October 2022, all HIF-owned risks have been identified if these are HIF only, or joint HDFT/HIF risks. Please see right column on risk tables.

From November 2022, all HIF risks are reported to HDFT Corporate Risk Review Group so both HIF and HDFT colleagues are fully cited on all risks.

Risks are reviewed at the following HIF meetings and committees:

- HIF Board of Directors
- HIF Governance and Compliance Committee
- HIF SMT







Risks – Estates

	Risk	Risk Detail
	Compliance & Service Delivery	Following an internal review, there are various compliance areas such as fire, water quality and health and safety that need urgent improvement to minimise safety and quality risks and ensure we align with our statutory / mandatory maintenance obligations. Current PPM not adequate.
S	Hot Water	Hot Water circulation temperatures are below the minimum required in HTM 04 "Safe Water in Healthcare Premises"
states	Service Yard	Poor condition and control of service yard. Suitable controls required i.e. walkways and signage
Esta	Estates Recruitment	Recruitment is a significant risk within estates due to the current number of vacant posts. This includes Maintenance Assistants, Maintenance Workers, Mechanical Technicians, Electrical Technicians and all frontline management staff (Estates Officers)
	Maternity Door Release	Potential for unobserved door release in maternity, if you were leaning over the desk to operate door release button or tail gating another person to exit unseen. HIF doing a piece of work to bring door access into the company.
	Failure of Nurse Call System	Nurse call systems are obsolete in most areas (33+ years old) and without a comprehensive maintenance contract in place. It will be "best endeavour's" to resolve any ongoing issues. Funding and replacement required site wide.

Risk lead redacted

Risks - Facilities, SSE and MEL

	Risk	Risk Detail
ties	Food Allergens	Accuracy of Allergen information on recipe specs for patient meals and retail. Lack of use of recipes in kitchen areas and standardization of product
cilitie	Kitchen Equipment	Kitchen equipment unitray trolleys, ovens and unfit catering equipment
Fa	Chef Recruitment	Challenges with recruiting to 'Chef' positions within HIF.

	Risk	Risk Detail
SSD	Failure of aging	Risk of failing to meet statutory legislation (HTM Series)
တ္တ	Washer	resulting in the insufficient availability of sterile medical
0,	Disinfectors	devices because of inadequate WDs

	Risk	Risk Detail
	Medical Devices	Risk of MEL being under resourced to manage new
	Resource &	equipment being procured and oversee all aspects of
MEL	Recruitment	medical devices management.
⋝	Insufficient turn-	Medical devices not available due to insufficient turn-
	around times	around times. Reporting on whether turn-around times are
		being met is unavailable, unclear of how long devices are
		out of action and unavailable to patients.







Risk lead redacted







HIF Policies

A review of all the Company's policies (HIF-authored policies) has now taken place and the Policy Register has been developed detailing the current position.

All HIF authored policies have now been reviewed and are updated. All policies are available on the intranet and uploaded to the HIF portals for colleagues to access.

Additional work has commenced to identify all Standard Operating Procedures (SOP's) associated with each policy and an update on this will be shared in January 2023.

To note, the next phase will be a focus on policies to be developed/established (including the addition of a 'Hand Reader Policy') and review of joint HDFT/HIF policies (including HR, Recruitment etc.).

POLICY NAME/TITLE	REVIEW DATE	RAG RATING
Water Safety Policy	Jun-24	
Decontamination of Flexible Endoscopes Policy	Jun-24	
General Waste Management Policy	Apr-24	
Procedure for the Loan of Surgical Instruments for Main Theatre and Day Surgery	Feb-24	
Single Use Small Orthopaedic Implants Policy	Feb-24	
Management of Decontamination Equipment Policy	Feb-24	
Protocol for the Tracking and Traceability of Used Medical Devices Processed by Sterile Services	Feb-24	
Policy Management of Asbestos	Jan-24	
Asbestos Management Plan	Jan-24	
Asbestos Policy	Jan-24	
Medical Device Training Protocol	Oct-23	
CCTV Policy	Sep-23	
Health & Safety Policy	Jun-23	
HACCP food safety System	Yearly on instruction by EHO or as new guidelines are introduced	
Fire Safety Policy	Jun-23	
Lift Policy	Mar-23	
Electrical Safety Policy	Sep-23	
Medical Equipment Policy Procurement and safe use of medical equipment	Sep-25	
Cleaning Policy	Sep-24	
Bomb Alert Policy	Oct-24	
Food Hygiene Policy	Sep-23	
Car Parking Policy and Procedures	Aug-20	To be reviewed by the Security & Car Parking Manager when in post







Business Modernisation

Achievements in Last Month	Focus for Next Month
Horizon Scanning on-going	Official launch of HIF Team Objectives
Social Media presence continues to grow	Meet & Greet Session due to take place
HIF Newsletter Issue V launched and recording of key highlights being spoken	E-Learning, Reading Group and IT Drop-in Sessions Continue and dates scoped for 2023
Meet the team Video featuring the Sewing Room launched	Meet the Team Videos featuring Medical Equipment Library is due to launch on social media – Monday 12 December 2022
Christmas Dinner booking system launched digitally on the #teamHDFT App	Scoping to continue for digital coffee loyalty card on #teamHDFT App and pre-payment card
HIF Objectives Sessions took place and were successful	Official launch of Catering Charter, Estates Charter and Estates Code of Practice







Business Development

Key updates:

- Work is on going to ensure Business Development is central and embedded within the company at all levels
- Social Media platforms are growing and engagement is increasing
- Continuous Horizon Scanning for potential new business opportunities
- Meet The Team' videos continue to be successful on Social Media platforms and website
- Christmas Dinner booking system launched digitally on the #teamHDFT App
- HIF Objective Sessions undertaken and successful, with good feedback received.







Financial Information HIF Board Report November 2022

Author: Katie Laurence

Date: 7th December 2022

Finance – Summary slide







Finance – forecast year end













Forecast – cost pressures







Financial position - workforce

Non-pay expenditure







HIF efficiency programme













Energy – Financial Performance

Balance sheet





