



**Unadopted Minutes of the Board of Directors' meeting held in public on 29 November 2022 in the Tony Currie Suite at Sheffield United Football Club**

**Present:**

**Members:**

Annette Laban	Chair
David Black	Medical Director (Development)
Tony Buckham	Non-Executive Director
Mark Gwilliam	Director of Human Resources and Staff Development
Michael Harper	Chief Operating Officer
Jennifer Hill	Medical Director (Operations)
Kirsten Major	Chief Executive
Chris Morley	Chief Nurse
Chris Newman	Non-Executive Director
John O'Kane	Non-Executive Director
Maggie Porteous	Non-Executive Director
Neil Priestley	Chief Finance Officer
Rosamond Roughton	Non-Executive Director
Mark Tuckett	Director of Strategy and Planning
Shiella Wright	Non-Executive Director

**Participating Directors:**

Sandi Carman	Assistant Chief Executive
Julie Phelan	Communications and Marketing Director

**In Attendance:**

Lucy Middleton	Business Manager (Minutes)
Mark Cobb	Therapeutics and Palliative Care Clinical Director
Amanda Forrester	Speech and Language Therapy Outpatient and Head and Neck Services Team Lead
Sarah Marshall	Speech and Language Therapy Community Team Leader
Sue Pownall	Head of Speech and Language for Therapeutics and Palliative Care
Laura Rumsey	Interim Midwifery Director
Juliet Swain	Speech and Language Therapy Acute Team Leader
Paula Ward	Organisational Development Director

**Apologies:**

Gul Nawaz Hussain	Non-Executive Director
Toni Schwarz	Non-Executive Director

**Observers:**

Three Governors  
Two members of staff  
One member of the public

Minute	Item	Action
STH/114/22	Welcome and Introductions	

Annette Laban, Chair welcomed Board members and those in attendance to the meeting.

**STH/115/22      Declarations of Interests**

There were no additional declarations or relevant declarations highlighted.

**STH/116/22      Minutes of the Previous Meeting Held in Public on 27 September 2022**

The Minutes of the meeting held in public on 27 September 2022 were **AGREED** and **APPROVED** as a correct record of the meeting.

**STH/117/22      Matters Arising and Action Log**

The Board received updates on the following matters arising from the previous meeting:

**a) Board Out and About Visits (Action log number 34, minute number STH/99/22)**

The “Out and About” feedback form had been updated to include an action section.. The Board agreed to close this item.

**b) Integrated Performance Report (Action log number 35, minute number STH/102/22)**

National benchmarking data was reported to the Finance and Performance Committee and would be included in future reports. The Board agreed to close this item.

**c) Covid-19 and ‘Flu Vaccination Programme – Best Practice Management Checklist (Action log number 36, minute number STH/106/22)**

Covid-19 and ‘Flu vaccination signposting now forms part of the Trust’s induction. The Board agreed to close this item.

**STH/118/22      Clinical Update**

David Black, Medical Director (Development) introduced the Speech and Language Therapy Service, Innovations and Aspirations item. Sue Pownall, Head of Speech and Language for Therapeutics and Palliative Care provided an overview of the Speech Therapy Service as well as information on education, training and innovation. Juliet Swan and Sarah Marshall, Speech and Language Therapy Acute Team Leaders detailed two patient journeys and Amanda Forrester informed the Board of some of the community initiatives provided.

In response to a query raised by Shiella Wright, Non-Executive Director a discussion took place around how the use of

interpreters and new technology supported patients with additional needs.

As a result of a question asked by John O’Kane, Non-Executive Director the Board discussed the national collaboration on research which recently resulted in a co-designed app for care home staff. The Board discussed how innovation is making a career within Speech and Language Therapy more attractive and highlighted other ways the occupation was being promoted to a wider diversity of people.

Following a question from Maggie Porteous, Non-Executive Director about investment into the service, the Board discussed working with the Integrated Care Board (ICB) on securing national funding for additional resources. The Board discussed the utilisation of the voluntary sector and promotion and development of self-management tools.

Chris Morley, Chief Nurse prompted a discussion about what was an acceptable level of risk with regards to patients with dysphasia in the community and what could the acute aspects of the organisation learn from this way of managing risk.

Annette Laban thanked the team for an informative and useful presentation.

#### **STH/119/22(a) Maternity Matters:**

##### **Maternity and Neonatal Safety Report**

Laura Rumsey, Interim Midwifery Director, presented paper C, the Maternity and Neonatal Safety Report and provided highlights from the report which included the positive outcomes of the latest Health Care Safety Investigation Branch (HSIB) engagement meeting, improvements in training compliance, recruitment levels and serious incident reporting processes.

Following a comment from Tony Buckham, the Board discussed how workforce and revised processes impact on the dashboard metrics and drive improvement and Chris Morley, chief Nurse advised that further work was required on the dashboard to identify appropriate benchmarks more easily.

Kirsten Major, Chief Executive informed the Board that Trust Executive Group have approved the full business case (FBC) for the Maternity Electronic Patient Record (EPR) which will be deployed in May 2024.

The Board of Directors **RECEIVED** and **DISCUSSED** the content of the report, particularly noting the changes to documentation ahead of the deployment of an end-to-end maternity information system, and the introduction of the Birmingham Specific Obstetric Triage System (BSOTS) to improve safety for women attending for triage.

**STH/119/22(b) Non-Executive Director Maternity Champion Feedback**

Chris Morley highlighted that the issue that Ros Roughton had raised as Non Executive Board Champion last month relating to contact details for primary care had been actioned. The feedback from staff about this was very positive.

**STH/119/22(c) Maternity Improvement Programme Quarter 3 Report**

Chris Morley, Chief Nurse presented paper D, the Maternity Improvement Programme Quarter 3 Report, which contained the updated priority actions. The report was **RECEIVED** and **NOTED** by the Board of Directors.

**STH/120/22 Outcome Report of East Kent Maternity and Neonatal Services Independent Investigation**

Chris Morley presented paper E, a summary of the report into maternity and neonatal services in East Kent, published in October 2022. The report identified key actions the Trust needs to undertake in the light of this national report and an outline of how this will be achieved. Chris noted that the key action areas identified in this report were being addressed within the Maternity Improvement Programme.

Maggie Porteous, Non-Executive Director prompted a discussion around what measures were in place to ensure a compassionate culture. Laura Rumsey noted that the work on culture was captured in multiple ways which are regularly reviewed.

The Board discussed opportunities for midwifery staff to have involvement in consultant recruitment and Kirsten Major, Chief Executive informed the Board that work regarding organisational approaches to consultant recruitment was being reinvigorated having been paused during the pandemic.

The Board of Directors **NOTED** the contents of this report.

**STH/121/22 Chief Executive's Matters**

Kirsten Major, Chief Executive presented paper Fi, Chief Executive's Matters and highlighted the following points:

**a) Covid-19 and Operational Update**

Kirsten updated the Board on the improved position of the Trust and detailed fewer in-patients with the Covid-19 virus.

Staff uptake of both 'Flu and Covid-19 vaccines had risen and vaccinations for long stay patients had been introduced. The Board noted that 'Flu cases in the community had been reported which indicated an early 'Flu season.

## **b) Integrated Performance Report**

The following matters were highlighted from the Integrated Performance Report (IPR) for September 2022:

### **Ambulance Waits**

Michael Harper, Chief Operating Officer provided the following updates in relation to Ambulance Waits:

- 67.95% of ambulance handovers were completed within 30 minutes against a national standard of 95%, whilst 15.06% of handovers took longer than 60 minutes in September 2022.

### **Activity Recovery**

Michael Harper, provided an update on activity recovery noting that during September there was an unplanned Bank Holiday which impacted on planned activity. When this was adjusted, September was more productive than August. Michael highlighted:

- There were 27,898 new outpatient attendances in September 2022, which was 89.2% of the activity delivered in September 2019.
- There were 10,580 day cases in September 2022, which was 100.6% of the activity delivered in September 2019.
- September had Theatre Utilisation of 78.8% against an 85% target.
- 48.8% of cancer patients received their first definitive treatment within 62 days of a GP referral in September 2022. This is consistent with performance of 48.9% in Quarter 2 2022/23; performance for the same metric in Q1 2022/23 was 48.5%.
- There were 33 patients waiting more than 104 weeks for planned care in September 2022, compared to 28 in August 2022. This was against a target of zero from July 2022. These patients have either elected not to go elsewhere to receive earlier care or they are extremely complex pathways.

Mark Tuckett, Director of Strategy and Planning advised the Board that the November 2022 cancer care position was stable and reported an improved waiting list position.

Prompted by a query from Maggie Porteous, Michael Harper confirmed that the Trust was managing capacity well and that the barriers to achieving pre pandemic levels of activity were around workforce. Neil Priestley, Chief Finance Officer added that theatre productivity was also being affected by increased complexity of patients.

Following a comment made by John O’Kane, Non-Executive Director it was agreed that to accurately compare activity across trusts of varying size, data should be presented as a percentage. Michael Harper also detailed plans in place to improve data quality.

#### Long Waiting Patients

Michael Harper provided the following updates in relation to long waiting patients:

Workforce challenges had been impacting on the availability of theatres lists and a subsequent impact on patient care activity. This position has improved recently and this will have a positive impact on the volumes of lists available. Additional measures were also being taken to address the increase in the PTL and were shared with the Board, including continual caseload management, planned overtime, patient choice and outsourcing.

Following a comment by Annette Laban, the Board recognised the challenges around giving complex, long waiting patients choice and discussed ways to improve uptake.

Following a comment made by Rosamond Roughton, Non-Executive Director a discussion took place around the additional funding Sheffield City Council has received and the ongoing work of the Trust around accurate recording of bed availability.

#### Staff Absence

Mark Gwilliam, Director of Human Resources and Staff Development provided the following update in relation to sickness related absences and mandatory training:

- Total sickness absence for September 2022 was down from 5.28% in August 2022 to 5.09% in September, against a target of 4%. Covid-19 related absence represented 0.71% of the total sickness figure in September.
- Appraisal compliance was down to from 85% in July to 84% in September against a target of 85%.

#### Delivery Against Financial Plan

Neil Priestley, Chief Finance Officer noted the following points in relation to the Trust’s position in the delivery against its Financial Plan for 2022/23:

- There were gains in the current financial position due to the Trust delivering less activity and therefore incurring fewer costs, largely due to higher than predicted levels of Covid-19 at the beginning of the financial year, and

an underspend on pay. This was offsetting shortfalls on the delivery of efficiency and other pressures.

- An assumed clawback of Elective Recovery Fund (ERF) has not been included in the position for Month 6 and it has been confirmed that there will be no clawback for H1.
- The key risks for 2022/23 were the delivery of the required level of efficiency savings, any unanticipated inflation/other cost pressures, and non-delivery of the elective recovery targets which may require repayment of ERF.
- The importance of monitoring the potential impact of a significant staff grading claim
- Ongoing work to seek resolution to the dispute associated with the Hadfield building.
- With regards to 2023/2024 Autumn Statement most inflation pressures have been funded and we should see the benefits of an investment in social care as a result of improved patient flow and capacity for elective care.

The Board of Directors:

- **RECEIVED** the Integrated Performance Report for August and September 2022
- **NOTED** the performance standards that are being achieved.
- **NOTED** that where performance standards are not currently met, a detailed analysis has been undertaken and actions are in place to ensure an improvement is made.

#### c) Tier One Provider Update

Kirsten Major, Chief Executive confirmed that the Trust would be designated a “Tier One” provider by NHS England. Kirsten noted that a self-certification exercise had been undertaken by the Trust which was reviewed at the Finance and Performance Committee and signed off by the Chief Executive and Chair.

#### d) Industrial Action – National and Local Position

Kirsten Major informed the Board that the national Royal College of Nursing ballot had concluded and had confirmed sufficient numbers of staff voting to support strike action on a Trust-by-Trust basis. This included the Trust. The Board discussed the impact this would have on service delivery and noted that appropriate derogations and operational plans would be put in place to ensure that patients are safe and receive urgent treatments as necessary.

Locally, a UNISON ballot of Rehabilitation Assistants in the Trust’s community services had taken place. The Trust had received notice of action short of strike which would commence

on 28 November 2022. Kirsten described the nature of this dispute.

Kirsten noted the remaining items on the report and invited any comments. No further comments were received.

**STH/122/22      Chair's Report**

The Board **RECEIVED** paper G, the Chair's Briefing Report for November 2022.

**STH/123/22      Board Out and About Visits**

The Board of Directors **NOTED** the contents of the update on the Out and About visits that have taken place in October and November 2022.

**STH/124/22      CQC Action Plan Update**

Jennifer Hill, Medical Director (Operations) presented attachment I, an update on progress against the priority workstreams under each of the five improvement programmes and areas of intensive support in response to the recent CQC re-inspection.

The Board of Directors **NOTED** the progress made against each improvement programme over the past month and the rationale / mitigation for the corresponding RAG ratings.

**STH/125/22      Enforcement Undertakings and Exit Criteria**

Kirsten Major, Chief Executive presented paper J, Enforcement Undertakings and Exit Criteria and confirmed that work completed to date aligned with the requirements detailed in the enforcement undertakings. The Board noted that compliance with the exit criteria did not automatically mean that the Trust would move from Segment 3 to Segment 2 of the NHS Operating Framework.

Following a comment from Rosamond Roughton, Non-Executive Director, Kirsten confirmed that in liaison with CQC the Trust would formulate an effective way to track the actions and close them down.

The Board of Directors:

- **APPROVED** the Enforcement Undertakings as drafted in Appendix I, to be accepted and signed by the Trust and NHS England.
- **AGREED** the approach outlined above and ensured sufficient action is taken to meet the requirements of the Undertakings.

**STH/126/22      Equality, Diversity and Inclusion Annual Report**



Kirsten Major welcomed Paula Ward, Organisational Development Direct to present paper K, Annual Equality, Diversity and Inclusion (EDI) Report. Paula advised the Board that the 2011 Census was used to guide the report as the full 2021 Census results were unavailable at the time of writing. Paula assured the Board that the 2021 Census results would be considered when they are released.

The Board acknowledged the achievements of the Trust and International nurse recruitment, inclusive interview panels and targeting apprenticeships were all celebrated as areas of progress.

The Board of Directors **REVIEWED** and **AGREED** the final draft of the Trust's Annual EDI Report and **APPROVED** its publication on the Trust's website by the end of January 2023.

**STH/127/22      Learning from Deaths Report**

Jennifer Hill, Medical Director (Operations) presented attachment L, Quarter 4 2022/23 Learning from Deaths Report and noted the ongoing work to improve data quality.

The Board of Directors **APPROVED** the content of the report.

**STH/128/22      South Yorkshire and Bassetlaw Pathology Network Partnership Agreement**

Mark Tuckett, Director of Strategy and Planning presented paper M, South Yorkshire and Bassetlaw Pathology Partnership Agreement.

Mark highlighted that as the Network host the Trust would be responsible for the day to day running of the Network and would manage decision making through already established processes and would therefore require updates to be made to the Trust's Scheme of Delegation. Mark noted that the agreement would be updated to amend the reference to the Trust's 'Standing Financial Instructions' to read 'Scheme of Delegation'.

Discussion focused on the Trust's responsibilities and liabilities of individual partners and particular risks for the Trust as host.

The Board noted that the responsibility for serious incidents would remain with the Trust who had provided the patient's treatment, however integrated reporting would be a requirement.

Neil Priestley, Chief Finance Officer described the proposed arrangements for cost sharing and reimbursement across the Network.

Non-Executive members of the Board explored the balance between the risks held by the Trust as host and its ability to make autonomous decisions without referral to and approval from other partners at the SYB Pathology Partnership Board.

Following a comment by David Black, Medical Director (Development) the Board discussed the requirement to have sufficient autonomy and control to provide a safe and effective service.

In addition, it was acknowledged that the implementation of technology would need to be managed alongside other large projects which will have an impact on a “go live” date.

The Board **APPROVED** the Partnership Agreement.

#### **STH/129/22      Research and Development Update**

David Black, Medical Director (Development) presented an update on research and development to the Board and confirmed that increased activity in this area formed part of the Getting Back on Track programme. The current research portfolio was improved but there was still work to do to ensure targets are achieved.

Key achievements highlighted were awards from the National Institute for Health and Care Research for the Clinical Facility for Experimental Medicine and the much expanded Biomedical Research Centre.

David noted that the Trust had reapplied for Experimental Cancer Medicine Centre (ECMC) status.

David concluded the presentation by detailing the plans to review the Trust’s Research and Innovation Strategy, noting that a development workshop was scheduled for January 2023.

Following a comment made by Annette Laban a discussion took place around recovery of recruitment to trials and options available to the Trust.

In response to a comment made by Rosamond Roughton , David Black confirmed that Board members would have the opportunity to have input into the development of the new strategy at a Board Strategy Session in the new year.

#### **STH/130/22      Universities Update**

Chris Newman, Non-Executive Director presented an update from the University of Sheffield.

Key points to note were:

- The appointment of Professor Ashley Blom as Vice President and Head of the Faculty of Medicine, Dentistry and Health.
- New degree level courses available, specifically Pharmacy,
- Details of research initiatives the University was involved in and
- Winning the Medipex, NHS Innovation Awards 2022.

#### **STH/131/22      Update on Five Year Capital Plan and Capital Programme**

Neil Priestley, Chief Finance Officer presented paper N, The Quarter 2 update on the 2022/2023 Capital Programme and Five-Year Plan. Since the last update to the Board, NHSE had confirmed business case approval and Public Dividend Capital (PDC) funding of £21.1m for the new Electronic Patient Record system, the Royal Hallamshire Hospital (RHH) Elective Orthopaedics Hub and the RHH Endoscopy Expansion scheme, as assumed in the 2022/23 Capital Programme.

Good progress was reported on several refurbishment projects including the labour assessment unit, H1, H2 and theatres.

Following a comment made by Annette Laban, Kirsten Major provided an update on the refurbishment at Weston Park Cancer Centre and noted the priority to recover cancer activity.

The Board of Directors:

- **APPROVED** the latest 2022/23 Capital Programme.
- **NOTED** the significant slippage risk and the consequences of under-delivering against the Operational Capital Allocation.
- **NOTED** the current large over-commitment for the following two years, which would need to be addressed via an appropriate combination of restrictions to scheme approvals, reductions ring-fenced budget cuts and significant additional funding.
- **NOTED** the likelihood of minimal further new scheme approvals in the coming years and the likely consequences of this.
- **NOTED** risks outlined in Section 5 of the report and, in particular, the need to identify opportunities to secure additional capital funding.
- **NOTED** the importance of capital planning/prioritisation and “value engineering” in securing maximum benefits from limited capital and revenue funding.

#### **STH/132/22      Board Committee Membership (Terms of Reference)**

Sandi Carman, Assistant Chief Executive presented paper O, updated Terms of Reference for the following Board Committees:

- People Committee
- Quality Committee
- Finance and Performance Committee

Rosamond Roughton, Non-Executive Director noted an amendment to the 'Accountable to' (section 3) of the Quality Committee Terms of Reference proposed by the Committee at its meeting on 21 November 2022 which was not reflected in the document presented to the Board. The Board discussed and agreed that the 'Accountable to' section of the Quality Committee Terms of Reference should be amended to read 'this Committee reports to the Board of Directors' which was consistent with the same section in the other Board Committee Terms of Reference.

Subject to the above amendment to the Quality Committee Terms of Reference, the Board of Directors **RATIFIED** the Terms of Reference for the above committees.

**STH/133/22      Application of the Corporate Seal**

The Board of Directors **NOTED** the approval to apply relevant signatures and seal to the documents relating to the lease renewal for Boots Pharmacy Units at Northern General Hospital and Royal Hallamshire Hospital granted at the October 2022 Board of Directors' meeting held in private.

**STH/134/22      Any Other Business**

There were no additional items of business discussed.

**STH/135/22      Date and Time of Next Meeting**

The next public Board of Directors' meeting will be held on 31 January 2023 at a time to be confirmed.

Signed ..... Date .....

Chair