



**Unadopted Draft Minutes of the Public Meeting of the Board of Directors
held on Tuesday 28 April 2020 by video conference**

Present:

Members:

Mr T Pedder	Chair
Mr T Buckham	Non-Executive Director
Ms A Gibbs	Director of Strategy and Planning
Mr M Gwilliam	Director of Human Resources and Staff Development
Mr M Harper	Chief Operating Officer
Dr D Hughes	Medical Director
Ms A Laban	Non-Executive Director
Ms K Major	Chief Executive
Professor C Morley	Chief Nurse
Mr J O'Kane	Non-Executive Director
Mr N Priestley	Director of Finance
Mr M Temple	Non-Executive Director
Ms S Wright	Non-Executive Director

Participating Directors:

Ms S Carman	Assistant Chief Executive
Dr J Hill	Medical Director (Operations)
Ms J Phelan	Communications and Marketing Director

In Attendance:

Ms R Winterbottom	Business Manager (Minutes)
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Apologies:

Professor C Newman	Non-Executive Director
Ms R Roughton	Non-Executive Director

Observers:

10 Governors
Two members of staff

Minute Item

STH/37/20 Welcome and Introductions

The Chair welcomed Board members and those in attendance to the meeting.

STH/38/20 Declarations of Interests

There were no declarations of interest made.

STH/39/20 Minutes of the Previous Meeting Held on Tuesday 31 March 2020

The Minutes of the previous meeting held on Tuesday 31 March 2020 were **AGREED** and **APPROVED** as a correct record of the meeting.

STH/40/20 Matters Arising

The Board noted that one matter arising remained open on the action log (Action log number 16, minute number STH/06/20(b)(iv)). It was agreed that this action would remain open until the November 2020 Board of Directors meeting when the Trust's Equality, Diversity and Inclusion (EDI) Manager would attend the Board to give an update on EDI priorities.

The Chair explained that a number of agenda items had been deferred under the current circumstances and were being recorded to be added back to a future meeting agenda. Where possible the Chair requested that items on the workplan were scheduled on agendas as originally planned.

STH/41/20 Chief Executive's Matters

The Chief Executive's report had been shared with the agenda papers; the Chief Executive highlighted the following points:

a) COVID-19 Gold Command Update

The Chief Executive gave a presentation which provided a detailed update on COVID-19. The presentation covered what had happened since the last meeting in relation to the Trust and national position, the current key risks and issues for the Trust and next steps.

Key points highlighted were:

- The Trust had experienced a peak in the number of COVID-19 in-patients including those in critical care in mid-April; sadly there had also been a number of patient deaths. In terms of the current phase the Trust was now between the peak and recovery phase
- Staff testing had been available at the Trust for a number of weeks and the Trust had extended the provision of testing to other healthcare providers in the system
- Across the country there was significant regional variation in terms of cases per 100,000 of the population the highest being 251 and the lowest being 93. Yorkshire and Humber had 140 cases per 100,000 of the population
- The Yorkshire and Humber Nightingale Hospital regional facility had been mobilised at speed, staff from the Trust had volunteered and taken part in induction so that the facility was ready to be opened should additional critical care bed capacity be required
- At present the Trust had adequate stock of personal protective equipment (PPE) thanks to the significant efforts of the procurement team and local collaboration including local schools
- Testing of all emergency admissions had commenced and the Trust was seeking to roll out testing to elective admissions
- There was a significant national campaign to highlight that the NHS was still open for urgent care and she noted that the Trust was working with local partners including GPs to urge anyone that needed help to not delay in seeking healthcare
- In terms of staff and workforce, she highlighted the extensive range of support resources that were available to staff. A detailed review of the

- levels of staff absence across the Trust was underway
- She highlighted the range of communications which were being provided to staff and noted that briefings had also been arranged with MPs and Governors. The Sheffield Star had published in full an open letter to Sheffield from the Trust outlining the planning and response to COVID-19
 - The Trust was planning for provision of both COVID and Non-COVID healthcare and was working through a framework of questions to establish the new normal position. The Chief Executive explained that this new normal position would be largely dependent on the reduction of COVID-19 cases being sustained, noting that the reduction had been the result of the social distancing measures. She highlighted that in the absence of a vaccine or significant cure/ treatment for COVID-19 a robust strategy of testing, tracking and isolating would be required to maintain / reduce current levels of cases

The Chair thanked the Chief Executive for her comprehensive update and invited questions from Board members.

The Chair asked about how the Trust benchmarked against other Shelford Group trusts in terms of the numbers of COVID-19 patients they were treating. The Chief Executive explained that as the prevalence of COVID-19 varied significantly across regions a comparison was difficult to make, but noted that the Yorkshire and Humber region had the fourth lowest number of cases per 100,000 in the country.

Annette Laban raised a question about whether there was the potential for the Trust to become overwhelmed by demand when the Trust resets to the new normal position. The Chief Executive explained that in terms of bed capacity the Trust would have capacity to open up elective Non-COVID pathways but that this would require a robust process of screening and isolating patients pre admission. The Chief Executive also added that there could be an increase in demand in relation to emergency care pathways with potentially sicker patients presenting as a result of delays in seeking healthcare.

Tony Buckham asked about contact tracking of people confirmed to have COVID-19 and whether any clarity had been given nationally around the use of mobile apps. The Chief Executive explained that workforce capacity would be a challenge to the implementation of widespread tracking and that an automatic mobile based model would likely be required. Nationally a tracking system was expected to be established by June 2020.

Noting the apparent disproportionate impact of COVID-19 on Black, Asian and Minority Ethnic (BAME) healthcare workers, patients and local communities in the UK, Shiella Wright asked what analysis and actions were taking place at a regional /local level. The Chief Executive explained that a National Review was underway and locally the Integrated Care System (ICS), (which included all South Yorkshire providers including the Trust) was working to analyse patient data and the results of staff testing to examine the BAME impact locally. The Chief Executive confirmed that the results of this analysis were expected within the next few weeks and that a set of actions for South Yorkshire providers would be produced as a result.

The Board of Directors **NOTED**;

- The current Trust position and the significant activity and planning that was underway to recover following the peak in cases and transition to a new normal
- That COVID-19 remained a significant operational challenge for the organisation
- The associated risks and challenges of providing both COVID and Non-COVID healthcare.

b) Integrated Performance Report

The following headlines were highlighted to the Board from the Integrated Performance Report (IPR) for February 2020:

The Medical Director (Operations) presented the Deep Dive which was on elective and non-elective length of stay. She highlighted the following points:

- The Excellent Emergency Care (EEC) Programme was leading the work to optimise patient flow and reduce length of stay. Three areas of focus were highlighted; Single Assessment, SAFER principles and Same Day Emergency Care (SDEC)
- Noting that the deep dive data on non-elective Dr Foster length of stay differed from the data presented in the core IPR, the Medical Director (Operations) explained that the two reports covered different reporting periods
- There were further opportunities to reduce short stay non elective admissions including SDEC which was on-going
- There had been gradual downward trend in patients with a >21 day length of stay since December 2017

Noting the encouraging progress that had been demonstrated in relation to reducing length of stay at the Trust the Chair asked about recalibration of length of stay data as a result of COVID-19. The Chief Operating Officer explained that reporting would continue as usual but that the COVID-19 impact may show as an anomaly in the reporting. The pre COVID-19 position would act as a benchmark.

Other points from the IPR highlighted to the Board were:

- The Medical Director (Operations) noted that the Hospital Standardised Mortality Ratio (HSMR) was showing in the 'higher than expected' range. An investigation was on-going to review the data and establish the reasons for this including Structured Judgement Reviews (SJR) of a number of deaths. She explained that Dr Foster had indicated that there were coding queries that required review and highlighted that the Standardised Hospital Mortality Indicator (SHMI) remained in the 'as expected' range. The results of the investigation would be reported back to the Healthcare Governance Committee in due course
- The Chief Operating Officer highlighted that in February, 87.30% of patients attending A&E were seen within 4 hours compared to a local target of 90% and the national target of 95%. This was 4.5% better than the national average performance for the month. He explained that this was an improvement from the previous month (81.63%) and

was a result of the work to improve flow across the organisation, support within the A&E department and the continued improvement in ambulance handover times

- The Chief Operating Officer reported that the percentage of patients on an incomplete pathway waiting less than 18 weeks in February 2020 was 91.69%. This was below the national target of 92.0%. He explained that in recent months significant validation had been required to meet this target. Due to the quickly developing impact of the planning workload for COVID-19 and impact on staff attendance, an agreement was made by Gold Command to cease validation in early March, resulting in the reporting of the performance below the national standard for February
- The Medical Director reported that the vast majority of clinical research trials had closed as a result of COVID-19. The Trust was participating in seven COVID-19 trials
- The Director of Finance noted that Month 11 was a fairly good month in relation to financial performance and explained that the reporting period covered in the IPR report was pre the impact of COVID-19

STH/42/20 Administration Profession Programme Roles Framework and Feedback from World Administration Day

The Chief Operating Officer provided an update on the progress of the Administrative Profession Programme (APP) including the APP Roles Framework and shared feedback from World Administrative Day (WAD) celebrations at the Trust on the 22 April 2020.

He noted that WAD celebrations had been scaled back due to the current social distancing measures and focus on COVID-19 impact, but explained that a range of communication activities had taken place to acknowledge the work of this professional group on the day and other planned celebrations would be deferred until later in the year.

He presented the APP Roles Framework that had been developed and approved by the Trust Executive Group in February 2020. He informed the Board that this had been well received by staff and Staff Side.

The Board recorded their thanks to administrative professionals at the Trust and acknowledged that clinical teams would be unable to operate without their contributions. The Board also recognised the complex administrative challenges that COVID-19 had raised and the significant role that administration teams had played in transforming the way that healthcare had been delivered since the outbreak began.

The Board of Directors **NOTED** the progress made by the Administration Profession Programme including the development of the APP Roles Framework at the Trust and recognised the celebrations undertaken for World Administration Day.

STH/43/20 Learning from Deaths Quarterly Report

The Medical Director (Operations) presented the quarterly report to the Board

of Directors on the deaths of patients under the care of the Trust as required by the Learning from Deaths Guidance of March 2017. The report covered Q2 of the 2019/20 period (1 July 2019 to 30 September 2019).

Key points highlighted were:

- There had been 617 deaths at the Trust between 1 July 2019 to 30 September 2019
- 65 deaths (including 7 neonatal) had been subject to Structured Judgment Review (SJR)
- None of the deaths subjected to SJR had been judged more likely than not to be due to a problem in care

Annette Laban confirmed that the report had been discussed in detail at the Healthcare Governance Committee.

The Board of Directors discussed and **APPROVED** the Learning from Deaths Report for Q2 of 2019/2020.

STH/44/20 Achievement of the 2019/20 Corporate Objectives

The Director of Strategy and Planning referred to the report which provided an assessment of the progress made on delivering the 2019/20 Corporate Objectives.

Out of the 58 measures that underpinned the 2019/20 Objectives, 41 were achieved, 17 were rated as amber and none rated as red.

She explained that development of the 2020/21 Corporate Objectives had been paused as a result of COVID-19 and the approach to this would be considered by the Trust Executive Group alongside the operational plan for 2020/21.

The Board of Directors **APPROVED** the assessment of progress made on delivery of the 2019/20 Corporate Objectives and **SUPPORTED** the proposed approach to development of Corporate Objectives for 2020/21.

STH/45/20 Chairman and Non-Executive Director Matters

The Chair wished to extend the thanks of the Board and Governors to the whole organisation for their continued efforts at the current time.

STH/46/20 Any Other Business

No additional items of business were raised.

STH/47/20 Date and Time of Next Meeting

The next Board of Directors meeting will be held on Tuesday 19 May 2020 by video conference at a time to be confirmed.