



Unadopted Draft Minutes of the Public Meeting of the Board of Directors held on 15 December 2020 by Video Conference

Present:

Members:

Mr T Pedder	Chair
Mr T Buckham	Non-Executive Director
Mr M Gwilliam	Director of Human Resources and Staff Development
Mr M Harper	Chief Operating Officer
Dr J Hill	Medical Director (Operations)
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
Ms R Roughton	Non-Executive Director
Mr M Temple	Non-Executive Director
Ms S Wright	Non-Executive Director

Participating Directors:

Mr P Buckley	Interim Director of Strategy and Planning
Ms S Carman	Assistant Chief Executive
Ms J Phelan	Communications and Marketing Director

In Attendance:

Ms H Brown	Nurse Director, South Yorkshire Regional Services (STH/126/20)
Mr A Horwood	Arrhythmia Care Coordinator, South Yorkshire Regional Services (STH/126/20)
Ms N Webster	Matron, South Yorkshire Regional Services (STH/126/20)
Ms R Winterbottom	Business Manager (Minutes)

Apologies:

Ms A Gibbs	Director of Strategy and Planning
Professor C Newman	Non-Executive Director

Observers:

10 Governors
Three members of staff

Minute	Item	Action
STH/122/20	Welcome and Introductions The Chair welcomed Board members and those in attendance to the meeting.	
STH/123/20	Declarations of Interests There were no additional declarations or relevant declarations	

highlighted.

STH/124/20 Minutes of the Previous Meetings Held in Public on 24 November 2020

The Minutes of the meeting held in public on 24 November 2020 were **AGREED** and **APPROVED** as a correct record of the meeting and would be **SIGNED** by the Chair at an appropriate time.

STH/125/20 Matters Arising and Action Log

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

a) Integrated Performance Report, Hospital Standardised Mortality Ratio (Action log number 20, minute number STH/74/20 (b))

The Board noted that as confirmed at the previous meeting a further update on the work on the Hospital Standardised Mortality Ratio (HSMR) would be provided in January 2021.

b) Integrated Performance Report, Deep Dive, Cancer Waiting Times (Action log number 24, minute number STH/116/20(b))

The Board agreed to close action number 24 as a benchmarking analysis on the Trust's cancer performance against performance of other Shelford Trusts had been presented to the Finance and Performance Committee on 14 December 2020.

STH/126/20 Clinical Update – Atrial Fibrillation

The Chief Nurse introduced the item and Andrew Horwood, Arrhythmia Care Coordinator, Helen Brown, Nurse Director and Natalie Webster, Matron, South Yorkshire Regional Services Care Group who were in attendance.

Andrew gave a presentation which described the evolution of the pathway for patients with Atrial Fibrillation and the work of the Cardiac Rhythm Management Service including their work with other Trust services and external agencies.

The Board thanked Andrew for an interesting presentation the following questions and comments were raised.

In response to a question from Shiella Wright, Andrew explained the use of the Patient Activation Measure (PAM) score to assess patients' levels of engagement and motivation with their condition. Noting that the PAM score was applicable to all long term conditions the Chief Nurse highlighted that it would be useful for the Trust to give consideration to how once assessed this score is shared across services.

Sheilla Wright asked whether the declining incidence of stroke was a trend seen across all communities, and suggested that further consideration was given to how to reach all communities.

Highlighting the role of primary care in relation to the management of long term conditions, the Chief Executive suggested that it would be helpful for the Accountable Care Partnership to be involved in the pathway development to ensure an integrated approach between the Trust's Cardiac Rhythm Management Service and primary care services in the city.

STH/127/20

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 Update

The Chief Executive gave a presentation which provided an update in relation to COVID-19. She updated on the current position including inpatient numbers including those in critical care, deaths, admissions and discharges as compared to the numbers reported at the last Board meeting.

She also highlighted the following points:

- An on demand drive through staff testing service was now fully operational at the Northern General Hospital.
- Lateral flow testing kits for all patient facing staff had been rolled out to all Directorates and were being distributed to staff to enable twice weekly asymptomatic testing.
- The staff absence level had reduced from the previous month (both for COVID and Non-COVID absence). Shielding had stopped with the ending of the national lockdown and it was expected that the COVID absence level would further reduce following the reduction of the self-isolation period from 14 to 10 days from 14 December 2020.
- The importance of retaining vigilance despite the vaccine.
- The Pfizer vaccine had arrived on Monday 7 December following Medicines and Healthcare products Regulatory Agency (MHRA) approval the Trust was prioritising roll out following Joint Committee on Vaccination and Immunisation (JCVI) guidance.

In response to a question from the Chair around the Christmas visiting arrangements, the Chief Nurse explained that this had been given careful consideration by the Trust Executive Group over the last few weeks. Due to the high level of community

prevalence of COVID-19 and potential risks associated with the relaxation of national restrictions over the Christmas period the view was that it was not appropriate to change the current visiting guidance, which was no visiting other than in exceptional circumstances. He added that this was consistent with the approach being taken by other Shelford Trusts.

b) Integrated Performance Report

The following matters were highlighted from the Integrated Performance Report (IPR) for October 2020:

Deliver the Best Clinical Outcomes

The Medical Director (Operations) highlighted that there were no new never events or serious incidents closed during October 2020 and confirmed that feedback from the deep dive into the HSMR would be provided to the Board in January 2021.

Providing Patient Centred Services

The Chief Nurse noted that the Friends and Family (FFT) inpatient score for October 2020 was below the Trust's target rate. He noted that collection of feedback had been paused in March 2020 in line with national guidance and highlighted that inpatient feedback had restarted on wards during October using text messaging to gather the feedback. The Patient Experience Team would continue to monitor the inpatient FFT score in coming months to establish whether the score was due to the change in feedback method.

The Chief Operating Officer highlighted the following points from the IPR:

- 18 week referral to treatment (RTT) performance had continued to improve during October. The percentage of patients on an incomplete pathway waiting less than 18 weeks was 78.76%. The national performance was 65.5%. There were 218 52 week breaches within the organisation in October.
- 81.49% of patients attending A&E were seen within 4 hours compared to a national performance of 84.4%. The impact of COVID-19 on the allocation of beds was having an impact on flow through the organisation. There was one 12 hour trolley wait in October; the Chief Operating Officer explained that this was a patient waiting for a mental health bed and that a full review of the circumstances which led to this wait had been carried out.
- Quarter 2 Cancer waiting times performance was reported in the October IPR:
 - Performance for breast symptomatic two week wait referrals was 91.6% (threshold 93%).

Performance was expected to continue to improve during quarter 3.

- 62 day referral to treatment (GP Referral), performance for non-shared pathways was 67.3% and shared performance was 64.5% (threshold 85%).
- 62 day screening pathways performance was 19.4% (threshold 90%). Performance was volatile due to very small numbers of patients on these pathways.
- For pathways relating to 31 day first treatment, performance was 94.0% (threshold 96%).
- The impact of pausing a number of services, as per national guidelines, during COVID Wave 1 was the primary cause for the cancer waits underperformance. The size of the cancer PTL has improved and remains stable.

Employ caring and cared for staff

The Director of Human Resources and Staff Development highlighted a good performance in respect of compliance levels for appraisals and mandatory training (85% and 87% respectively).

He highlighted the annual turnover rate at October was 6.88% and the retention rate remained at 91%.

Annette Laban noted that the highest turnover rate was for Admin and Clerical staff and asked what more could be done to improve this. The Director of Human Resources and Staff Development highlighted the Administrative Profession Programme (APP) led by the Chief Operating Officer and work led by the Organisational Development Department. The Director of Human Resources and Staff Development also added that the Trust was engaging with schools to promote the breadth of opportunities available in the NHS.

Spend Public Money Wisely

The Director of Finance highlighted the following points for October (Month 7):

- Month 7 was the first month of the new funding arrangements.
- The reported position was a £1,014.9k (0.1%) surplus against plan.
- COVID-19 costs/income losses of £2.3m were funded from the Months 7-12 COVID allocation held by the Trust.
- Potential risks highlighted were; the receipt of the Month 6 'True-Up' payment, the likely increased accrual for untaken annual leave and the application of the national Elective Incentive Scheme.

- Financial and Business Planning for 2020/21 was likely to be challenging given the environment and the many operational / planning uncertainties and the change in financial regime.

The Chair asked about the timetable for the 2021/22 planning process. The Director of Finance confirmed that the internal planning process had commenced with directorate first cut plans due at the end of January. He noted that national timetables were unconfirmed but that the financial arrangements for 2021/22 were expected to be the same as the arrangements for the second half of 2020/21.

In response to a comment from John O’Kane around the accrual for untaken annual leave the Director of Finance confirmed that this was an issue nationally and confirmed that the Trust was strongly encouraging staff to take their annual leave.

Deliver Excellent Research, Education and Innovation

The Medical Director (Development) confirmed that reporting of trials remained suspended due to COVID-19. He highlighted the Trust’s focus on supporting COVID-19 research including involvement in the Oxford Vaccine Trial and the Janssen COVID-19 Vaccine Trial.

c) Flu Vaccination Programme

12,300 members of staff, which is 2,000 more than last year, had now been vaccinated for flu and in a considerably shorter space of time. As a result, 68.4% of frontline staff had been vaccinated compared to 61.6% last year. The Trust continued to offer flu vaccinations.

d) Responsible Officer Role

The Board **NOTED** that the Responsible Officer role, which is a statutory role with responsibility for overseeing the process of Medical Revalidation, transitioned back to Mr Andrea Galimberti, Deputy Medical Director on 1 December 2020, having been held on a temporary basis by the Medical Director since 24 July 2020 due to an unplanned absence.

e) Hadfield Update

The Director of Finance gave an update on progress in relation to the Hadfield Building noting that there were two main outstanding issues, subject to confirmation he estimated that these issues would take around 12 weeks to be resolved.

STH/128/20 For Approval

STH/128/20(a) Use of the Corporate Seal - Lease for the North of England Pathology and Screening Education Centre

The Board of Directors **APPROVED** the lease renewal for the North of England Pathology Screening Education Centre (NEPSEC) at Unit and the application of the Trust's seal to the contract documents related to this.

STH/128/20(b) Use of the Corporate Seal - Licence for Alterations Beighton Health Centre

The Board of Directors **APPROVED** the application of the Trust seal to the Licence for Alterations relating to part of Beighton Health Centre, Queens Road, Sheffield, S20 1BJ.

STH/128/20(c) Licence to Occupy

The Assistant Chief Executive referred to Attachment F which reported retrospectively to the Board of Directors approval granted through Chair's action for the Licence to Occupy Agreement for Sheffield International Venues (SIV) Limited (Sheffield Arena) for the COVID Vaccination Programme. The Board **NOTED** the approval of the Licence to Occupy Agreement for Sheffield International Venues (SIV) Limited.

STH/129/20 Chair and Non-Executive Director Matters

No matters were raised by the Chair and Non-Executive Directors.

STH/130/20 Any Other Business

Noting that it was the Chair, Tony Pedder's last Board of Directors meeting before he retired at the end of the month, the Chief Executive took the opportunity to extend the Board's thanks to Tony for his dedicated leadership of the Trust over the last nine years. On behalf of the Board she wished Tony well for the future.

STH/131/20 Date and Time of Next Meeting

The next public Board of Directors meeting will be held on 26 January 2021 at a time to be confirmed.

Signed Date

Chair