



**Unadopted Draft Minutes of the Public Meeting of the Board of Directors
held on 25 May 2021 by Video Conference**

Present:

Members:

Annette Laban	Chair
Tony Buckham	Non-Executive Director
Mark Gwilliam	Director of Human Resources and Staff Development
Michael Harper	Chief Operating Officer
Jennifer Hill	Medical Director (Operations)
David Hughes	Medical Director (Development)
Kirsten Major	Chief Executive
Chris Morley	Chief Nurse
John O'Kane	Non-Executive Director
Maggie Porteous	Non-Executive Director
Neil Priestley	Director of Finance
Ros Roughton	Non-Executive Director
Toni Schwarz	Non-Executive Director
Martin Temple	Non-Executive Director

Participating Directors:

Paul Buckley	Interim Director of Strategy and Planning
Sandi Carman	Assistant Chief Executive
Julie Phelan	Communications and Marketing Director

In Attendance:

Lisa Biggin	Healthcare Support Worker, Combined Community and Acute Care Group
Helen Chapman	Head of Integrated, Community Care Combined Community and Acute Care Group
Julie Dutton	Integrated Care Nurse Lead, Combined Community and Acute Care Group
Maria Levesley	Integrated Care Team Nursing Lead, Combined Community and Acute Care Group
Rachael Winterbottom	Business Manager (Minutes)

Apologies:

Chris Newman	Non-Executive Director
Shiella Wright	Non-Executive Director

Observers:

Six Governors
Two members of staff

Minute	Item	Action
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STH/54/21 Welcome and Introductions

The Chair welcomed Board members and those in attendance to the

meeting in particular she welcomed the two new Non-Executive Directors; Maggie Porteous and Toni Schwartz to their first meeting of the Board of Directors.

STH/55/21 Declarations of Interests

The Board **NOTED** that the Trust's Register of Interests would be updated accordingly following the appointment of Maggie Porteous and Toni Schwartz, Non-Executive Directors.

There were no additional declarations or relevant declarations highlighted.

STH/56/21 Minutes of the Previous Meetings Held in Public on 27 April 2021

The Minutes of the meeting held in public on 27 April 2021 were **AGREED** and **APPROVED** as a correct record of the meeting.

STH/57/21 Matters Arising and Action Log

The Board received the following update in relation to the one open action on the log:

a) Integrated Performance Report, Deep Dive, Delayed Transfers of Care; Action number 26, Minute number STH/44/21(b)

The Board noted that an update on the management of Delayed Transfers of Care was scheduled for the September meeting of the Board of Directors.

STH/58/21 Chair's Matters

The Chair presented her Chair Board Briefing Report for May 2021.

The key developments to note were:

- The appointment of Maggie Porteous, Non-Executive Director following interviews on 13 April 2021.
- The appointment of Toni Schwarz, Non-Executive Director following a nomination from Sheffield Hallam University.

Both individuals began a four year term of office from the 1 May 2021.

The Board of Directors **NOTED** the Chair's report.

STH/59/21 Clinical Update – How Sheffield Teaching Hospitals Implemented Health Care Support Workers (HCSW) Administering Insulin to Patients in their Homes

The Chief Nurse introduced this item and welcomed, Lisa Biggin, Healthcare Support Worker; Helen Chapman, Head of Integrated Community Care; Julie Dutton, Integrated Care Nurse Lead; Maria Levesley, Integrated Care Team Nursing Lead from the Combined Community and Acute Care Group (CCA) to the meeting.

The team gave a presentation on how the Trust had implemented Healthcare Support Workers (HCSW) administering insulin to patients in their homes.

The key points to note were:

- The incidence of diabetes continued to rise. In the UK 4.9 million people had diabetes and this increasing trend was predicted to continue.
- In this context Community Nursing teams have experienced a growing demand for support from the service to administer insulin to patients who are unable to self-manage.
- This increase in demand compounded by the challenges of coordinating insulin administration visits were the drivers behind introducing this change.
- A pilot of HCSW administering insulin to patients in their homes started in 2017 in the Darnall Community Nursing Team. The development of the policy, governance process, job descriptions and training programme to support this change provided an excellent example of collaborative working across a range of Trust services and involved; Community Matrons, Diabetes Specialist Nurses, Medicines Management teams, Governance teams and Human Resources. Being a combined community and acute Trust was a key benefit to enabling this collaboration.
- The pilot evaluated well with positive outcomes for patients, HCSW, other staff and the service.
- The emphasis placed on the provision of holistic care for patients was highlighted by the team. A key benefit of HCSW carrying out these visits was that it often facilitated the development of good relationships with patients.
- Challenges identified during the pilot were addressed and training for the administration of insulin by HCSW was rolled out city-wide. In addition to insulin HCSW are now trained to administer Dalteparin to patients.
- The Trust had received national recognition for this work.

Questions and comments following the presentation included:

Ros Roughton asked about the services interaction with General Practice and Primary Care Networks. Helen Chapman explained that day to day management of this cohort of patients was the responsibility of the Community Matron and Diabetes Specialist Nurse but added that GPs were aware of the service.

Noting the challenge around releasing staff for training Ros Roughton asked about the support for back fill. Helen explained that in Sheffield there were no issues with recruitment of community nurses and highlighted how well engaged and innovative the community teams at the Trust were.

Martin Temple asked whether there was scope to use this approach to deliver other healthcare interventions. Helen explained that there was further scope to expand the role of the HCSW and noted that along with the administration of insulin and Dalteparin, HCSWs were also trained

as phlebotomists, additionally, where it was appropriate for individual patients, tasks could be delegated by registered nurses. The Chief Nurse added that the robust governance framework established around this process could be applied to other interventions and areas.

Toni Schwarz asked about the extent to which the Trust was involved in diabetes prevention work, Helen confirmed that the Trust was represented on a city wide group which focused on prevention and health promotion. Building on this point Ros Roughton suggested that this might be a good example of joint working to feed into conversations with the Integrated Care System.

On behalf of the Board of Directors the Chair thanked the team for their presentation remarking that it was great to hear their commitment to holistic care for their patients.

STH/60/21 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 provided an update on the current position in relation to Covid-19. This included an update on the Trust's current number of Covid-19 inpatients; including those in critical care; those who had sadly died from Covid-19 and total numbers of admissions.

Since the last Board of Directors meeting:

- There had been an ongoing decline in Covid-19 hospital activity and cases. Activity was now at the lowest level since March 2020.
- There had been a decline in community infections in Yorkshire and Humber. High rates elsewhere in the country were a concern.
- The vaccine programme in South Yorkshire and Bassetlaw continued to be successful.
- The large scale vaccination centre would move from Sheffield Arena to the Longley Lane site on the Northern General campus on 26 July 2021.
- Work to increase eligible staff uptake of the vaccine continued with a particular focus on increasing the uptake of vaccination in ethnic minority staff.
- The Trust would continue to work with city partners to increase vaccine uptake in the wider community.
- To coincide with the easing of national lockdown restrictions Gold Command was carefully considering the Trust's roadmap out of lockdown. Changes to highlight included:
 - Modification of the staff risk stratification guidance
 - New rules on foreign travel
 - Changes to meeting rules
- As yet there were no changes to the Personal Protective Equipment requirements.

- Visiting restrictions were being regularly reviewed by Gold Command at the present time the rule was one visitor for one hour per day per patient.
- There had been excellent progress on restoring services to deliver care to patients.

The Board of Directors **NOTED** the update in respect of Covid-19.

b) Integrated Performance Report

The following matters were highlighted from the Integrated Performance Report (IPR) for March 2021:

Deep Dive – Hospital Standardised Mortality Ratio (HSMR)

The Medical Director (Operations) presented a deep dive on the Hospital Standardised Mortality Ratio (HSMR) which built on the detailed update given to the previous Board of Directors' meeting, the Medical Director (Operations) highlighted the following points:

- As described at the previous meeting the HSMR Task and Finish Group had highlighted a number of data issues that could be affecting the HSMR data model.
- In terms of current performance, when Covid-19 as a diagnosis was removed from the model, the 12 month rolling position showed the HSMR had returned to the 'within expected range' for the last 3 months.

Additional to the presentation at the April Board the deep dive report contained a HSMR comparison with regional hospitals, the Shelford Group and other large teaching hospitals. This benchmarking demonstrated:

- HSMR remained high for most Trusts across the region. Eight of the 14 Trusts shown in figure 4a report HSMR as 'higher than expected' for the rolling 12 month period of February 2020 to January 2021.
- Figure 4b showed that the HSMR is high for four Trusts across the Shelford Group and for Leeds Teaching Hospitals NHS Trust.
- When the Covid-19 diagnosis is removed from the model;
 - Regional hospitals show a reduction in HSMR and 10 of the 13 Trusts are 'within expected range'
 - All Trusts in the Shelford and Large Teaching Hospitals group move to 'within expected range' apart from one.

In summary, the ongoing work with Dr Foster and improved quality of data input into the model suggested that the Trust's HSRM (with Covid-19) excluded was moving to the 'within expected range'.

The Board of Directors **NOTED** the update and requested that further updates be brought back to the Healthcare Governance Committee and Board of Directors as this work progressed.

Deliver the Best Clinical Outcomes

The Medical Director (Operations) informed the Board of Directors of one new never event reported in March 2021. All serious incidents were approved within timescales.

The Chief Nurse noted that this month's IPR included the year end infection prevention and control figures, he highlighted the following:

- For the full year to date the Trust had recorded 3 cases of MRSA, which was the same number of cases reported in the previous year.
- For the full year to date the Trust had recorded 65 Trust attributable cases of MSSA, 2 cases above the threshold of 63 for the year. This was 6 fewer than in the previous year.
- For the full year to date the Trust had recorded 149 Trust attributable cases of E.Coli, 7 cases below the threshold of 156 for the year. This was 14 fewer than in the previous year.
- For the full year to date the Trust had recorded 149 cases of C.Difficile which was 7 cases below the threshold of 156.

Providing Patient Centred Services

The Chief Nurse highlighted that the Friends and Family Test score for Maternity was 84% for March, below the internal target of 86%, work was underway to understand the reasons for this and was being considered by the Patient Experience Committee.

The Chief Operating Officer highlighted the following points:

- In relation to planned care;
 - The percentage of patients who had been waiting less than 18 weeks for their treatment at the end of March was 80.41% better than the national performance for March which was 64.4%.
 - There were 1096 52 week breaches in March 2021. These patients were being reviewed clinically on a regular basis as part of the Trust's caseload management approach.
 - The percentage of patients waiting 6 weeks or less for their diagnostic test was 89.29% at the end of March. The national performance for March was 75.7%.
- In relation to A&E performance;
 - In March 2021 80.36% of patients attending A&E were seen within 4 hours.
 - Attendances at A&E continued to increase, the volume of patients attending with minor illnesses / injuries had also increased.
 - There had been a marginal improvement in relation to ambulance handover times in March compared to February.

Noting the increasing attendances at A&E the Chair asked if the Trust were able identify specific areas within the city which patients were attending from. The Chief Operating Officer described ongoing work in

partnership with the Clinical Commissioning Group to break down attendances by General Practice to identify any patterns in the city. The Board noted that the drivers for A&E attendances were varied and were not limited to the accessibility of primary care; the Board recognised that a citywide response to reducing attendances was required and supported the partnership approach described by the Chief Operating Officer.

Employ caring and cared for staff

The Director of Human Resources and Staff Development drew the attention of the Board of Directors to the following metrics:

- Compliance levels for appraisals and mandatory training were 84% and 88% respectively, below the Trust's targets of 90%.
- The annual turnover rate was 6.81% and the retention rate remained high at 92%.

Spend Public Money Wisely

The Director of Finance explained that the audit process for the 2020/21 Financial Statements was nearing its conclusion. The Audit Committee had met the previous day and had recommended that the Board of Directors approve and adopt the Financial Statements. The Board would be considering the Financial Statements later that day.

Deliver Excellent Research, Education and Innovation

The Medical Director (Development) informed the Board of Directors that national reporting of research metrics would resume in Quarter 2. He highlighted that TEG had agreed to provide a separate report detailing the Trust's involvement in ongoing Covid-19 research.

c) Clinical Director – Urology

Mr David Smith had been appointed as Clinical Director for Urology, with effect from 1 June 2021.

d) Cancer Prehabilitation and Rehabilitation Programme

The Advanced Wellbeing Research Centre (AWRC) at Sheffield Hallam University, Yorkshire Cancer Research and Sheffield Teaching Hospitals were working together to support people affected by cancer in Sheffield through a new prehabilitation and rehabilitation service.

This initiative was in the mobilisation phase with a plan to start receiving referrals in Autumn 2021. The development of this service had generated interest in other areas across the Trust.

e) Hadfield Update

The rectification works on the Hadfield Building were completed in early May and the Trust received a letter from South Yorkshire Fire and Rescue Authority on 7 May 2021 following an onsite inspection

confirming withdrawal of the Prohibition Notice. Planning for reoccupation of the building was underway with planned reoccupation of the ward accommodation starting on 5 - 6 June 2021 and completing on 3 - 4 July 2021.

f) Regulation 28 – Laura Booth

Following the inquest into the sad death of Laura Booth in October 2016, the Trust had received a Prevention of Future Deaths (Regulation 28) Report from Her Majesty's Coroner.

In this report the Coroner highlighted issues relating to Laura's nutritional care, but acknowledged that Trust had subsequently made changes to its nutrition services and processes to ensure appropriate support for patients with complex nutritional needs.

The Coroner also highlighted concerns relating to the Trust's application of the Mental Capacity Act, in particular staff awareness of the requirements and the steps needed to ensure patients and families are involved fully in decisions about care and treatment. Prior to receipt of the Coroner's report, we had completed a review of our Mental Capacity Act training and the revised programme was launched in early May 2021. Work was in progress to identify what further actions were required in light of the Coroner's findings.

The Trust would be responding to all of the Coroner's recommendations as required by 4 July 2021.

g) EU Settlement Scheme – Application Deadline 30 June 2021

The application deadline for the EU Settlement Scheme was 30 June 2021. There were just over 340 staff at the Trust to whom this would apply. The Trust had been engaging with and informing the workforce regarding the EU Settlement Scheme and the required steps. A full support programme was in place and described within the Chief Executive's report.

h) Strategy Development

The Chief Executive highlighted that in considering the framework for the new corporate strategy the Trust Executive Group (TEG) had received a proposal to adopt a new strategic aim associated with sustainability and responding to the climate emergency. TEG was supportive of this approach and the strategy would be developed to incorporate this. The Board of Directors endorsed this proposal.

i) Communications and Awards Update

A number of teams and staff at the Trust had been recognised for excellence in their field in the last month. A full list was provided within the Chief Executive's Report.

j) South Yorkshire and Bassetlaw Integrated Care System (SY&B ICS)

A report from the Chief Executive of SY&B ICS was appended to the Chief Executive's report at Appendix A. This provided a summary update on the work of the SY&B ICS for the month of April 2021.

k) Sheffield Accountable Care Partnership

An overview of the programme activities for the Sheffield Accountable Care Partnership had been provided by the Programme Director and was included at Appendix B.

STH/61/21 Governance Frameworks

The Chief Nurse presented the Maternity Services' Governance Framework to the Board of Directors for ratification and sought Board approval to use this framework as a template for each of the Trust's Clinical and Corporate Directorates.

Key points to note were:

- Under the Trust's Scheme of Delegation, the Board of Directors reserves unto itself the approval and monitoring of the Trust's policies and procedures for the management of risk.
- The Maternity Services' Governance Framework sets out the local implementation of the Trust's Framework for Risk Management and the Trust's Healthcare Governance Arrangements Policy and Framework for Delivery.
- TEG reviewed and supported the approach set out in the Maternity Governance Framework on 7 April 2021. The final version was noted by TEG on 14 April 2021.
- Following Board ratification of the Maternity Services Governance Framework, it was proposed that further documents developed across the organisation in line with this template would be approved by TEG as local enactment of Board approved policy and procedures.

In response to a question from the Chair, the Chief Nurse confirmed that training on the application of this and other governance frameworks would be tailored and appropriate to staff at different levels.

The Board of Directors **RATIFIED** the Maternity Services' Governance Framework and **SUPPORTED** the approach of using this framework as a Board approved template for the on-going development of local governance frameworks.

STH/62/21 Corporate Objectives

The Interim Director of Strategy and Planning presented Attachment F which presented the end of year position on delivery of the Trusts' corporate objectives for 2020/21 and those proposed for the initial part of 2021/22.

Key points highlighted were:

- Of the 23 2020/21 objectives, 16 were rated green; six, amber and one red.
- Covid-19 had impacted on the delivery of some of the objectives in 2020/21.
- A small number of corporate objectives for the initial part of 2021/22 were proposed at Appendix B of the report. These objectives would bridge the short term gap whilst the Trust's new organisational strategy was being developed.

The Board of Directors:

- **NOTED** the progress made in delivering the corporate objectives for 2020/21.
- **APPROVED** the proposed objectives for the initial part of 2021/22.

STH/63/21 Fit and Proper Persons Declarations

The Assistant Chief Executive presented Attachment G the output of the annual Fit and Proper Person self-assessment for the Board of Directors.

The Assistant Chief Executive confirmed that self-assessments had been completed by all Board members. These returns had been reviewed by the Chair and Assistant Chief Executive. The Chair's return was reviewed by the Assistant Chief Executive.

The Board of Directors **NOTED** that all Non-Executive Directors, Executive Directors and Senior Managers that attend the Board have completed an annual self-declaration form during quarter 4 of 2020/21. There are no issues that impact on individuals' abilities to perform their duties.

STH/64/21 Self-Certification Against the Conditions of the Provider Licence

The Assistant Chief Executive presented Attachment H, the Trust's self-certification against the conditions of the provider licence for 2020/21.

She explained that this was an annual requirement for NHS Foundation Trusts. She noted the requirement for providers to confirm that their Governors have received enough training and guidance to carry out their roles, as such the Lead Governor had reviewed and confirmed this element of the certification.

John O'Kane added that the Audit Committee had reviewed the self-certification at their meeting the previous day and recommended approval to the Board of Directors.

The Board of Directors:

- **APPROVED** the content of the draft self-certification, and;
- **NOTED** that the final approved version of the self-certification would be published on the Trust website within a month of Board approval.

STH/65/21 Annual Reports including Terms of Reference and Workplans of the Board Committees

The Assistant Chief Executive presented the 2020/21 Board Committee Annual Reports to formally report to the Board of Directors on the work of each Board Committee in 2020/21 and indicate their proposed workplans for 2021/22. Committee Terms of Reference were also presented to the Board of Directors for ratification following their annual review and approval by each of the individual Committees.

The Assistant Chief Executive highlighted the following points:

- The full suite of Board Committee Annual Reports had been reviewed by both the Trust Executive Group and Audit Committee in advance of presentation to the Board of Directors. Other than some delays in presentation of papers to Committees due to Covid-19 there were no material / significant matters of concern to bring to the attention of the Board of Directors.
- A key theme for the development of Board Committee Annual reports this year had been on ensuring that continuous improvement was incorporated into the routine ways of working.

The Board of Directors:

- **RECEIVED** the Board Committee Annual Reports (including workplans and Terms of Reference) and was **ASSURED** that the Committees had discharged their responsibilities in 2020/21.
- **AGREED** the 2021/22 Committee workplans; and
- With the recent changes to Board Committee membership reflected the Board of Directors **RATIFIED** the Committee Terms of Reference.

STH/66/20 Non-Executive Director Matters

No matters were raised by any of the Non-Executive Directors.

STH/67/20 Any Other Business

There were no additional items of business raised.

Finally, the Chair extended the Board's thanks to the Interim Director of Strategy and Planning for his extensive contributions to the Board of Directors and wider organisation over the last year. The Board would be welcoming back the Director of Strategy and Planning the following month.

STH/68/20 Date and Time of Next Meeting

The next public Board of Directors meeting will be held on 29 June 2021 at a time to be confirmed.

Signed Chair Date