

Sheffield Teaching Hospitals NHS Foundation Trust

Chief Executive's Briefing

Board of Directors – 28 July 2020

1. COVID-19 Gold Command Update

The Trust is currently responding to the on-going implications of the COVID-19 pandemic which, alongside continuing to care for a small number of patients with COVID-19, has now moved into the Reset second phase. The change in emphasis from Response to Reset has enabled reconsideration of the command structure arrangements which have been reconfigured to provide appropriate support to the Reset agenda.

Given the rapidly changing situation a verbal update and presentation will be provided at the meeting.

2. Integrated Performance Report

The Integrated Performance Report is attached at Appendix A. Each Director will highlight the key issues for the Board of Directors.

3. Legacy Park Limited

I am pleased to announce Lucy Melleney, Chief Executive of Darnall Well Being has been appointed to the Board of Directors at Sheffield Olympic Legacy Park. Sheffield Teaching Hospitals, as a founding Member of Legacy Park Limited, is delighted to welcome Lucy to the Board as a Community Director.

The Sheffield Olympic Legacy Park brings together a unique partnership of organisations with a vested interest in improving physical activity and wellbeing and a commitment to harnessing the power of education, research and innovation to deliver transformational change.

Lucy will act as a conduit and help capture a local community perspective, working with the Board to deliver one of its key Olympic legacy objectives - to provide local people with significant improvements in health, wellbeing, education, skills, training, and job opportunities and to contribute to the economic regeneration of the local area.

Darnall Well Being is a local, not-for-profit, community anchor organisation working to help the people of Darnall, Tinsley and neighbouring areas stay healthy and through an integrated programme of activities and services, it aims to reduce health inequalities by working with local people, to help build knowledge, connections, cohesion and resilience.

4. Appointment of a new Clinical Director for Renal Services

I am pleased to announce the appointment of Dr Veena Reddy as Clinical Director for Renal Services. Dr Reddy is currently a consultant in Renal Services and commenced in role on the 6 July. I would like to take the opportunity to thank Dr Bisher Kawar, during his term as Clinical Director.

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

A report from the Chief Executive of SY&B ICS can be found at Appendix B. This provides a summary update on the work of the SYB ICS for the month of June 2020 including performance scorecards.

6. Sheffield Accountable Care Partnership

As we move into the Reset phase of the COVID-19 pandemic the Accountable Care Partnership is now considering the most effective way of re-establishing the core workstreams whilst recognising the positive aspects of different way of working across our system over the last couple of months. A summary of the approach is included at Appendix C.

Kirsten Major
Chief Executive
28 July 2020



CHIEF EXECUTIVE REPORT

July 2020

Author(s)	Andrew Cash, Chief Executive Officer		
Sponsor	Andrew Cash, Chief Executive Officer		
Is your report for Approval / Consideration / Noting			
For noting and discussion			
Links to the STP (please tick)			
<input checked="" type="checkbox"/> Reduce inequalities	<input checked="" type="checkbox"/> Join up health and care	<input type="checkbox"/> Invest and grow primary and community care	<input checked="" type="checkbox"/> Treat the whole person, mental and physical
<input checked="" type="checkbox"/> Standardise acute hospital care	<input checked="" type="checkbox"/> Simplify urgent and emergency care	<input checked="" type="checkbox"/> Develop our workforce	<input checked="" type="checkbox"/> Use the best technology
<input checked="" type="checkbox"/> Create financial sustainability	<input checked="" type="checkbox"/> Work with patients and the public to do		
Are there any resource implications (including Financial, Staffing etc)?			
N/A			
Summary of key issues			
This monthly paper from the System Lead of the South Yorkshire and Bassetlaw Integrated Care System (SYB ICS) provides a summary update on the work of the SYB ICS for the month of June 2020.			
Recommendations			
The SYB ICS Health Executive Group (HEG) partners are asked to note the update and Chief Executives and Accountable Officers are asked to share the paper with their individual Boards, Governing Bodies and Committees.			

South Yorkshire and Bassetlaw Integrated Care System

CHIEF EXECUTIVE REPORT

July 2020

1. Purpose

This paper from the South Yorkshire and Bassetlaw Integrated Care System System Lead provides an update on the work of the South Yorkshire and Bassetlaw Integrated Care System for the month of June 2020.

2. Summary update for activity during June 2020

2.1 Coronavirus (Covid-19): The South Yorkshire and Bassetlaw position

There continues to be an ongoing decline in new cases, including the number of Covid-19 cases in South Yorkshire and Bassetlaw. This sustained reduction in new cases allows the system to firmly look ahead towards Phase Three from August 2020 to April 2021 - resetting the NHS.

There are a number of key concerns for health leaders as the NHS recovery process looks to restore services. Issues raised include restoring the NHS amidst workforce challenges, potential lengthening of waiting lists, and strict infection control measures – all of which will significantly impede capacity.

Supplies of Personal Protective Equipment (PPE) have improved significantly, particularly sterile gowns and sterile gloves and alternative suppliers through the support of Heads of Procurement have been sourced. General PPE continues to improve though there remain some concerns about the supply of PPE in Primary Care, and this remains a high priority.

PCR testing (testing of swabs to see if people have the virus) continues to be in a strong position. SYB labs have capacity to undertake testing of NHS and social care patients and staff. In addition, members of the public with symptoms have access to swabbing via the regional testing sites at Doncaster Airport and Meadowhall as well as via the mobile testing units (MTUs) that are sited most days at Barnsley County Way, Rotherham AESSEAL stadium and Dearne Valley Leisure Centre. The MTU at Meadowhall continues to be one of the five busiest in England, typically undertaking more than 400 swabs per day.

For antibody testing, approximately 50% of all NHS staff in SYB have now been tested (up to 22nd June) although this varies between each of SYB's five Places; Doncaster and Bassetlaw were first to have the analytical capacity in the lab and most staff there have been tested.

With regards to the NHS reset, there is now a very strong case being considered for returning to fewer hospital Covid treatment sites in SYB. This would see the scale-down of the Covid surge capacity response, mirroring the original scaling up in March. At the same time, partners are now resuming some services, focusing on clinical priorities for those who most urgently require treatment. Cancer care continues to be one of the main priorities in SYB's system recovery plans and partners are working to review and reprioritise patients.

The System also has a role in supporting reset in the community. Working with partners in primary care and the community there is a need to ensure that population health and the needs of our communities post-Covid are understood and supported. This includes the plans that are underway for how to manage the follow-up and rehabilitation needs of patients who have had Covid.

Each of SYB's Local Authorities has a robust Local Outbreak Plan which is supported by a regular flow of data and led by Directors of Public Health. With the recent further easing of lockdown

measures at the beginning of July, partners' Plans took into account the potential for increase in demand, particularly in relation to urgent and emergency services.

2.2 National update

On June 9th, there was a joint session between ICS and STP Independent Chairs and Executive leaders with senior colleagues at NHSE where the future of system working was discussed. The event was one of a broader conversation on the future of systems, alongside further opportunities to be involved in the coming months.

2.3 Regional Update

The North East and Humber Regional ICS Leaders continue to meet weekly with the NHS England and Improvement Regional Director to discuss where support during Covid-19 should be focused. Discussions during June focused on improving BAME inclusion, outbreak management arrangements, support for care homes, supporting urgent and emergency care as public confidence returns and planning for Phase Three.

2.4 Planning for Phase 3 and Phase 4

Further NHS planning guidance and a financial framework are expected in mid-July. A first draft SYB System Plan, which is an amalgamation of all five Place Plans, is currently in development. It takes into account constraints such as workforce, estates management, infection control and PPE while also incorporating examples of best practice in SYB and nationally. There will be a final submission at the end of July.

To support the planning process, a workshop to stress test the restoration of broader health and sustainment of care services in a COVID environment with partners took place on June 1st. This valuable exercise explored four possible scenarios across Places, offering opportunities for colleagues across health and care to analyse local plans in order to make improvements. Feedback from the session was very positive, with the learning now being built into local plans.

2.5 Identifying and embedding transformational change across SYB and capturing learning from the Covid-19 crisis

The ICS Programme Management Office is working with the Yorkshire and Humber Academic Health Science Network to capture views of senior leaders and colleagues from across SYB's health and social care organisations to feed into the joint project: 'Identifying and embedding transformational change across SYB and capturing learning from the Covid-19 crisis'. To accurately capture and understand the innovation that is emerging, views are being gathered from those directly involved in the implementation of the rapid changes through an extensive consultation exercise.

2.6 Cancer update

Cancer care continues to be one of the main priorities in SYB's system recovery plans. Partners are working to review and reprioritise patients who have previously been on waiting lists. Those patients who have waited for a long time already and are a priority clinically are very much at the forefront of efforts to receive fast-track diagnostic and treatment services.

The results of the recently published NHS England and Improvement commissioned National Cancer Patient Experience Survey saw SYB 2% above the national average in the areas of patients thinking they were seen 'as soon as necessary' (86%) and the length of time 'waiting for tests to be done being about right' (90%). The survey monitors national progress on the patient's experience of cancer care and acts as a driver to improve quality at local level. This is strong evidence of the excellent work taking place across SYB.

2.7 Planning for Flu

Modelling for influenza infections in the UK is now starting to take place as preparations for winter get underway, with a recognition that this could occur alongside a further Covid-19 peak. This is firmly on the radar of SYB's testing cell which has started to devise a winter testing strategy to support the system level planning. Supporting this work will be a system level flu strategy, which will be made up of five Place plans and a SYB Flu Board.

2.8 Accelerating NHS progress on health inequalities during the next stage of COVID recovery

The disproportionate impact on people from Black, Asian and minority ethnic communities, people living in areas of high deprivation and inclusion health groups shows starkly the health inequalities which persist in England today. The NHS Long-Term Plan commits the NHS to addressing health inequalities and much excellent work is underway already, particularly focused on medium and long-term action. But progress needs to be accelerated; responding to and recovering from COVID calls for more focused, additional and immediate actions.

To address this, NHS England and Improvement have established a Task and Finish Group, composed of a range of system leaders and voluntary sector partners, to focus on what specific, measurable actions should be taken by the NHS in the next few months. The Group will take account of feedback and ideas already received from BAME organisations, the VCSE sector, local systems and others.

This work is distinct from but complementary to the dedicated work on the NHS as an employer being led by the Chief People Officer on supporting our BAME NHS staff and implementing the NHS Workforce Race Equality Standard.

In SYB, the response to health inequalities is being taken forward by Workforce Leads, Kevan Taylor and Dean Royles.

2.9 Support for the Centre for Child Health Technology (CCHT)

The Sheffield MPs wrote to the Government to outline their support for a new world class research and innovation facility in Sheffield. The Sheffield Children's Hospital sponsored Centre for Child Health Technology (CCHT) at the Sheffield Olympic Legacy Park would be a multi-million transformational project supported by regional partners and international businesses including IBM Watson Health, Cannon Medical, Phillips and the South Yorkshire and Bassetlaw Integrated Care System. The site would span over 51,000 square metres, delivering world-class clinical and technical innovations to support children's health and wellbeing in SYB and beyond.

2.10 Sheffield City Region devolution deal agreed

South Yorkshire's devolution deal has finally been agreed and brought to the House of Commons. This is a significant step forward for South Yorkshire's economy and our congratulations go to Dan Jarvis, Mayor of the Sheffield City Region, and his team on this fantastic achievement. Once passed into law, an additional £30million pounds will be allocated to Sheffield City Region for regeneration projects supporting local growth and transformation. This is a great example of partnership working and its long-term impact is likely to shape the lives of the population for years to come.

2.11 Volunteers and Carers

Partners recognised the thousands of carers in SYB during Carers Week (8-14 June). Many of the patients who visit GP surgeries or go into hospital are cared for by a relative or have caring responsibilities themselves. Carers Week was a timely opportunity to thank them for all they do and particularly for their vital role in helping vulnerable people manage their health and care needs during the coronavirus outbreak.

It was also National Volunteers Week 1-7 June. Likewise, volunteers bring significant added value to health and care organisations with their experience and talent and the week was a great opportunity to thank the many thousands of volunteers in South Yorkshire and Bassetlaw for all they do.

3. Finance update

A new national financial framework is being developed to cover the period from August 2020 to March 2021 which is built upon the financial framework adopted for the period from April 2020 to July 2020. This will form part of the planning guidance is due to be released shortly.

The system has submitted capital plans to the region which total £47.1m which cover both the 'base case' and 'stepped up case' planning assumptions provided for this exercise. Further work is being undertaken to prioritise these schemes if the system is provided with a cash limited financial envelope to cover such expenditure.

From March to July 2020, commissioners and providers have been funded at actual cost to enable a break even position each month. From August 2020 to March 2021 this will be replaced with a cash limited sum which will replace the retrospective top-ups to commissioners and providers to allow them to break even and to reimburse costs associated with COVID 19. The intention is to provide systems rather than organisations with a financial envelope.

Andrew Cash
System Lead, South Yorkshire and Bassetlaw Integrated Care System

Date: 6 July 2020

How we intend to work as an ACP - summary

- We have all experienced a hugely challenging four months across our health and care system. There will have been many personal tragedies; and for our city and its population, the economy, our public and community-based and voluntary services, the impact of Covid-19 has been very challenging and will remain so for a long time
- We *have* seen a quite different way of working across our system over the last couple of months and ‘*command and control*’ has felt very rapid and – somewhat counterintuitively – quite empowering and devolved. Smaller groups of people have had to get on and implement changes very quickly.
- Looking to the future, and beyond ‘command and control’ we are considering how we might stand back up elements of our work as an ACP. We intend to continue an approach of flexibility and adaptability. Over the next 6-12 months or so, our approach will have the following five aspects:
 - **We want to continue and expand an approach of ‘devolved problem solving’.** The right people, from across our Sheffield communities and ACP workforce, coming together and being empowered to solve particular and specific challenges or problems. *Who* should be involved and leading particular areas of work will vary hugely according to the questions at hand – we won’t be prescriptive; and rather than focussing on particular remits and comprehensive coverage *per se*, we will focus on the skills and knowledge of people for particular problems.
 - We are **not expecting to reinstate regular formal meetings for all of the various workstreams of the ACP.** Some delivery boards will re-establish; others won’t – and those that do will likely look very different. We absolutely don’t want to lose the engagement of those people who were involved in and supported these delivery boards; or the work and content that was being done. Rather, **we want to take those agendas forward in a different way.** We will work with people involved in previous meetings for the ACP and how they can continue to be involved in the approach that we envisage and in shaping and improving our health and care system. **We hope that this way of working can be a much more effective use of people’s time.**
 - **We will reinstate a regular Executive-level meeting for our ACP, which will effectively connect senior leadership across our partnership.**
 - This way of working will require us to **think quite differently and creatively about how we communicate and coordinate this across our partnership.** Fewer opportunities for the regular update, and stocktake meetings means that we will need to think how we do this differently. There are also some specific communications activities that we want to undertake across our partnership – for people in Sheffield, and for staff in our organisations.
 - Finally, we want to **bring together – and to continue to develop – a broad understanding about the impact of Covid-19 on our system.** This will need to be a broad and collaborative effort.

This is a proposal which we intend to start to introduce and enact, **and** continue to evolve over time, as we get a better understanding of our system, relationships and the shape that we are in. We understand that many of you will want to see detail of the problems we are addressing, how these relate to the previous ACP workstreams and updates on specific pieces of work; we are aiming to clarify all of this as soon as we can, although need to ensure that we take the time to do this properly and with the right amount of staff and public engagement. The ACP core team (contactable at acp.sheffield@nhs.net, or any member of the team individually) would welcome any questions related to this, and any thoughts about the approach set out in this note.