

Sheffield Teaching Hospitals NHS Foundation Trust

Chief Executive's Briefing

Board of Directors – 23 February 2021

1. Covid-19 Gold Update

As the Covid-19 pandemic continues and the impact is felt on all aspects of our services, the Trust is focused on safely providing urgent and emergency services and high levels of planned elective care. During this time we continue to ensure we provide effective support for the health and wellbeing of our staff and patients.

A more detailed presentation of the current situation will be provided in the meeting.

2. Integrated Performance Report

The Integrated Performance Report (paper Cii), each Director will highlight the key issues for the Board of Directors.

3. Deputy Medical Director Appointments

I am pleased to announce that interviews for two Deputy Medical Director posts were held during the first week of February. These posts were to replace Dr Jennifer Hill and to succession plan for Dr Andrew Gibson. Mr Simon Buckley and Dr Robin Ghosh were appointed from a highly competitive field. Both candidates have significant leadership experience in a variety of roles and the two appointees will bring contrasting and complementary skills to the Medical Directors' team. Dr Ghosh will take up post with immediate effect and Mr Buckley will join the team later in the year

4. NHS Genomic Medicine Service Alliance

The Trust has been informed of the successful outcome following a submission to establish the NHS North East and Yorkshire Genomic Medicine Service Alliance. This is a collaborative proposal with colleagues from Newcastle, Leeds and Sheffield Children's Hospital.

There are seven NHS GMS Alliances across the country that will support the implementation of genomic medicine into the NHS and the delivery of the NHS Long Term Plan ambitions and will focus on;

- Equitable access to standardised end-to-end pathways of care, inclusive of genomic testing and clinical genetics and genomic counselling services;
- Access to treatments and medicine optimisation driven by comprehensive genomic and diagnostic characterisation. Initial priorities will include familial hypercholesterolaemia, sudden cardiac death, DYPD testing for prediction of fluoropyrimide chemotherapy toxicity and screening for Lynch syndrome, a familial cancer susceptibility condition;
- The number of people of accessing clinical trials by ensuring the systematic consideration of eligibility to clinical trials for patients who would potentially benefit; and

- Active participation and contribution to the nationally coordinated and facilitated approach to genomic research across the country to embed research and discovery to advance clinical care for patient and societal benefit.

A core infrastructure is being put in place to support the NHS GMS Alliance. A GMSA Partnership Board is being established to oversee the development and delivery of the NHS GMS Alliance business plan and includes:

- A Clinical Director with expertise in genomics and a practicing clinician who will have responsibility for setting the strategic clinical direction and leading all aspects of the clinical activity of the NHS GMS Alliance.
- Programme and project management support to coordinate the work of the NHS GMS Alliance.
- Communications and PPI expertise that supports communication and engagement across the geography.
- Medical; nursing, midwifery and allied healthcare professionals; pharmacy; research and innovation; workforce development & informatics.

The Trust has representation from David Hughes (Medical Director -Development), Chris Morley (Chief Nurse), Damian Child (Chief Pharmacist) and Paul Buckley (Interim Director of Strategy and Planning) on the Partnership Board.

5. Integration and Innovation: Working Together to Improve Health and Social Care for All

On 11 February 2021 the Department of Health & Social Care published its legislative proposals for a [Health and Care Bill: Integration and Innovation: working together to improve health and social care for all](#). The proposals build on the NHS's recommendations in the 2019 Long Term Plan, shaped by the recommendations of NHS England, reflecting the travel towards Integrated Care Systems (ICSs) and informed by experience since Covid-19.

Over the next few weeks we will be considering the implications of the proposals in preparation for their anticipated implementation in 2022.

6. Maternity Support Workers

Jessop Wing has become one of the first maternity units in the country to successfully implement an apprenticeship scheme for Maternity Support Workers (MSWs).

A cohort of 11 MSWs have completed the 18 month Senior Healthcare Support Worker Level 3 Apprenticeship, with seven of them obtaining a distinction.

Combining practical hospital experience with learning at Sheffield College, the apprenticeship offered the opportunity to gain skills and knowledge specific to maternity care.

The apprenticeships are part of a drive to develop the MSW role nationally and give support workers the skill set to be part of multi-disciplinary teams looking after mums and babies. The scheme is supported by the Royal College of Midwives.

The apprentices ranged in age from 19 to 50, with some already having prior experience as support workers while others were new to the role. They were able to complete the course despite the challenges of the Covid-19 pandemic, with distance learning enabling them to continue their studies.

My congratulations to all the successful apprentices: Gemma Hall, Chelsea Portaluri, Justine Deakin, Becky Harrison, Rachel Bennett, Hayley Preston, Amanda Wilks, Steph Machin, Jenny Harrison, Kayli-Rose Green and Olivia Rider.

7. Axe the Fax

In 2018, the Secretary of State for Health stipulated the removal of fax machines in NHS organisations by 31 March 2020. Fax is old technology and is an insecure and antiquated method of transferring patient identifiable information because of the risk of transmitting sensitive information to an incorrect destination. The number of fax enabled devices across Sheffield Teaching Hospitals at the start of the project was 608. The switch from sth.nhs.uk email system to NHS.net in October 2019, enabled the Trust to move away from faxing. STH Digital has supported operational teams to consider and implement alternative methods of communication as determined by the scope of use of fax within their area. There is currently only one clinical department, within STH that needs to retain fax functionality due to circumstances beyond our control. Fax functionality has been removed from Xerox Multi-Function Devices (MFDs) with the exception of the clinical department and the Emergency Planning Team who will keep fax functionality available in the background should an urgent need arise.

It is worth noting the achievement of this project within existing resources and the benefits of successfully delivering the project including improved information security and liberation of phone lines. My congratulations to all the teams involved in this work.

8. 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 1. This provides a summary update on the work of the SY&B ICS for the month of January 2021 including performance scorecards.

9. Sheffield Accountable Care Partnership

The Board received the most up to date overview of the programme activities for the Sheffield Accountable Care Partnership when it met last month.

Kirsten Major
Chief Executive
23 February 2021



Chief Executive Report

Health Executive Group

9 February 2021

Author(s)	Andrew Cash	
Sponsor		
Is your report for Approval / Consideration / Noting		
For noting and discussion		
Links to the ICS Five Year Plan (please tick)		
Developing a population health system	Strengthening our foundations	
<input checked="" type="checkbox"/> Understanding health in SYB including prevention, health inequalities and population health management	<input checked="" type="checkbox"/> Working with patients and the public	
<input checked="" type="checkbox"/> Getting the best start in life	<input checked="" type="checkbox"/> Empowering our workforce	
<input checked="" type="checkbox"/> Better care for major health conditions	<input checked="" type="checkbox"/> Digitally enabling our system	
<input checked="" type="checkbox"/> Reshaping and rethinking how we flex resources	<input checked="" type="checkbox"/> Innovation and improvement	
Building a sustainable health and care system	Broadening and strengthening our partnerships to increase our opportunity	
<input checked="" type="checkbox"/> Delivering a new service model	<input checked="" type="checkbox"/> Partnership with the Sheffield City Region	
<input checked="" type="checkbox"/> Transforming care	<input checked="" type="checkbox"/> Anchor institutions and wider contributions	
<input checked="" type="checkbox"/> Making the best use of resources	<input checked="" type="checkbox"/> Partnership with the voluntary sector	
	<input checked="" type="checkbox"/> Commitment to work together	
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 January 2021.

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.

Chief Executive Report

SOUTH YORKSHIRE AND BASSETLAW INTEGRATED CARE SYSTEM

Health Executive Group

9th February 2021

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 January 2021.

2. Summary update for activity during January

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

As at the end of January, the latest figures show that for South Yorkshire and Bassetlaw over 170k people in the highest priority groups had now been vaccinated. Just over 60k of those are 80 years old or over which is around 80% of the total number of people in this category we need to. The remainder of the 170k are either people 75 years and above, people who are classed as clinically extremely vulnerable and patient facing NHS and social care staff. The numbers are, of course, changing all the time. The latest statistics for South Yorkshire and Bassetlaw are published weekly here: <https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-vaccinations/>

All local primary care centres continue to vaccinate as planned and additional vaccination capacity has opened at Sheffield Arena. The Arena team is vaccinating 7 days a week, 12 hours a day and the first week of operation saw all available appointment slots taken up. The majority of care home residents across the region have now been vaccinated and vaccinations for patients registered as housebound with their GP practice have also commenced. Patient facing NHS and Social Care staff across the region also continue to be vaccinated.

Partners in each of our places, including NHS, Local Authority and Community, Voluntary and Faith groups are working together to ensure vaccination myths are dispelled and community leaders are helping to support positive messaging around the vaccination campaign, particularly in our communities that have been identified as most vaccine hesitant or who are seldom heard. Partners are also sharing Covid-19 vaccine facts resources to help combat a rise in the incidence of vaccine fraud.

All five places in South Yorkshire and Bassetlaw have been chosen to receive £1.4 million national funding for the Community Champions scheme, which awards councils and voluntary organisations funding to deliver a wide range of measures to protect those most at risk - building trust, communicating accurate health information and ultimately helping to save lives. This will include developing new networks of trusted local champions where they don't already exist and will also support areas to tackle misinformation and encourage vaccination take-up.

In terms of COVID-19 cases, the trend is a slowly downward. The lockdown is starting to have an effect, albeit slowly, with progress slow because the rates were high before the lockdown and the newer (more contagious) Covid-variants that have since been identified. Across the five places in SYB, rates are all falling with fewer outbreaks reported, and death rates continue to decline. Cases

of COVID-19 in the over 80s are also declining which, it is hoped, is an early sign that the vaccination programme is having an impact.

2.2 Regional update

The North East and Humber Regional ICS Leaders have been meeting weekly with the NHS England and Improvement Regional Director to discuss the ongoing COVID-19 incident, planning that is taking place to manage the pandemic and where support should be focused. Discussions during January focused on Wave 3 surge plans, the COVID-19 response and vaccination programme.

In addition to operational issues, ICS Leaders have been involved in discussions about the development of integrating care across four workstreams. These workstreams mirror the development work that is taking place in SYB: Place-based partnerships; provider collaboratives; how the nature of commissioning will change; and the integrated care system.

2.3 National update

NHS England and NHS Improvement (NHS E/I) issued their Phase Four letter on 23 December in which the operational priorities for winter and 2021/22 were set out. Key elements from the Letter include managing the ongoing demand from COVID-19, rapid implementation of the COVID-19 vaccination programme, maximising capacity to provide treatment to non-COVID-19 patients, preparedness to respond to the seasonal winter pressures and supporting the wellbeing of our workforce.

It also set out clear ambitions around how systems should address pandemic-related population health concerns as a direct result of COVID-19 in the areas of reducing health inequalities, expanding mental health provision and prioritising investment in primary and community care services.

There is also a clear framework for how systems should follow the new financial framework around funding (consistent with the NHS' Long Term Plan). A helpful summary by the NHS Confederation can be read [here](#).

As part of national efforts to support all regions with the ongoing challenges of COVID-19, Amanda Pritchard, Chief Operating Officer for NHS England and NHS Improvement (NHS E/I) sent a further letter to NHS leaders on Tuesday 26th January.

The letter titled 'Reducing burden and releasing capacity to manage the COVID-19 pandemic' explains that systems should ensure they make pragmatic decisions about how best to free up management capacity and resources to focus on additional competing priorities around the vaccination programme and continued non-Covid care.

The letter encourages NHS trusts and foundation trusts to consider options including the pausing of all non-essential oversight meetings, streamlining assurance and reporting requirements and only maintaining those existing development workstreams that support recovery.

2.4 Safe Maternity Services during the COVID-19 Pandemic

The South Yorkshire and Bassetlaw Local Maternity and Neonatal System (LMNS) has published its 'Safe Maternity Services during the COVID-19 Pandemic' strategy. The document offers best practice guidelines to midwives and midwifery teams to ensure the care for women (and families) during the pandemic remains as unaffected as possible.

The LMNS has been ensuring service users are engaged with during these unprecedented service adaptations. By providing the most up to date evidence based information, the LMNS is working with partners to enable women to make choices that are personalised to their individual needs, wishes

and requirements.

The full document is published here:

https://www.healthandcaretogethersyb.co.uk/application/files/9516/0994/1635/Covid_Safety_Strategy_LMS_210104_v7_-_final.pdf

2.5 Sheffield City Region

The Sheffield City Region Mayoral Combined Authority and Local Enterprise Partnership approved their 20-year Strategic Economic Plan (SEP) on 28th January. The Plan sets out local leaders' blueprint to drive the region's recovery from COVID-19 and transform South Yorkshire's economy and society for people, businesses and places.

The SEP paves the way to a stronger, greener and fairer economy as the region looks to unlock its potential and create prosperity and opportunity for all. The ambition of the 20-year Strategic Economic Plan is for the South Yorkshire economy to look very different in 2041, with an extra £7.6bn Gross Value Added (GVA), 33,000 extra people in higher level jobs, reduced income inequality and improved wages by over £1,500 for the lowest paid, and a net zero carbon economy.

2.6 Mental Health White Paper

The government has published the Reforming the Mental Health Act White Paper, which sets out proposed changes to the Mental Health Act 1983. The paper also sets out proposals and ongoing work to reform policy and practice to support the implementation of a new Mental Health Act. The proposals take forward the majority of the recommendations made by the Independent Review of the Mental Health Act 1983.

The government is seeking views, until 21 April 2021, on the implementation and impact of the reforms. Feedback will inform the drafting of the Bill to amend the Act, which will be brought forward when parliamentary time allows.

2.7 SYB Recovery Plan

The pandemic has caused an unprecedented rise in waiting times for hospital and diagnostic care, interrupted ongoing care in the community for mental health and other long-term conditions and assessments for social care support. The impact has been devastating on our population, particularly on health inequalities which continue to widen. Our plan has always been to address inequities in access and outcomes through a collective partnership approach and we must now accelerate our efforts.

Before the Pandemic, South Yorkshire and Bassetlaw (SYB) had one of the lowest number of people nationally waiting over 52 weeks and today the region continues to hold a comparatively smaller over 52-week waiting list. Nonetheless, we are keen to address any delays and reduce the impact on our population.

The innovation and resourcefulness that helped to enable SYB's health and care system to continue delivering safe patient care during the pandemic will also be integral to our future plans. Our close partnership with the Yorkshire & Humber Academic Health Science Network will see the continuation of our co-developed Rapid Insights research - with a view to implementing recommendations where opportunities exist across the system.

As a partnership, we are now starting to shape the development of priorities for the coming year utilising the expertise and experience of our wider health and care partners to meet these challenges in the months and years ahead.

2.8 Sheffield Olympic Legacy Park

Proposals for the Sheffield Olympic Legacy Park (SOLP) were unveiled in January. The project, which involves and is supported by SYB partners, is set to yield significant economic and health benefits within SYB and across the UK.

It joins up a number of prestigious commercial (IBM and Canon Medical Systems Europe) and regional public sector partners on the 35-acre site benefiting from the cluster of specialised health and care, academia, clinical research and sports engineering centres.

Situated in the east of Sheffield, newly unveiled plans over the next five years are set to see a further 5,600 high value jobs created whilst generating over £2bn in Gross Value Added (GVA) benefits to support a post-pandemic and post-Brexit UK economy.

This development site is already home to a number of established research and development hubs including the English Institute of Sport Sheffield (EISS), Advanced Wellbeing Research Centre (AWRC) and National Centre of Excellence for Food Engineering (NCEFE), alongside the Oasis Academy Don Valley and the FlyDSA Arena, ensuring that it provides excellent transport links to the M1, tramway inter-connectivity to Sheffield and Rotherham but also with the possibility of greener links via the Sheffield & Tinsley Canal.

Perhaps one of the standout facilities on the Park will be development of the new national Centre for Child Health Technology (CCHT), thought to be the first of its kind globally, tasked with focusing on addressing issues that affect children and young people – with the added benefit of delivering over £200m in savings to the NHS in the next ten years.

In addition, Canon Medical Systems Europe will also host a world-leading diagnostic imaging lab and research centre, delivering ultramodern digital research and development capabilities to support the enhancement of diagnostics in the NHS.

I would like to acknowledge SYB partners Sheffield City Council, Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield Hallam University, Sheffield City Trust, Sheffield Children's NHS Foundation Trust and Yorkshire & Humber Academic Health Sciences Network for their exceptional work in supporting this key transformational project.

2.9 Anchor Networks

The impact the NHS has on people's health extends beyond the role as a provider of treatment and care. As large employers, buyers, and capital asset holders, our health care organisations are well positioned to use their spending power and resources to address social, economic and environmental factors that widen inequalities and contribute to poor health.

Anchor institutions are key to making a strategic contribution to the health and wellbeing of the local population and the local economy and include the NHS, along with local authorities, universities and other non-profit organisations. An Anchor Network goes one step further to bring the institutions together and early discussions are now taking place with the national team on what this means for SYB. A proposal is being developed with the four North ICSs taking a collective approach which will be informed by a system-wide event.

3. Finance update

At Month 9 the system is reporting a forecast surplus of £36.1m compared with a plan deficit of £3.9m. This is a significant improvement on the Month 8 forecast and reflects a reassessment of the forecast position at Month 9 and the continued impact of under-performance on elective activity and reduced cost pressures on CCG budgets.

Capital slippage has increase in Month 9 to a forecast £21.6m on planned spend of £163m or 13.2%. The slippage is due to the challenges of delivering a capital programme during the

pandemic, significant additional capital allocations for COVID-19 and critical infrastructure and the revisiting of a material business case. The slippage has been offset by a forecast unplanned charge of £9.5m for the Rotherham Carbon Energy scheme.

Because of the ongoing impact of the pandemic the financial framework that is in place for the second half of 20/21 will be rolled forward into at least the first quarter of 21/22. Further details are awaited.

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

Date: 3 February 2021