Results of elections for governors



Making a difference



Pioneering medical breakthroughs







The free members' newsletter of Sheffield Teaching Hospitals NHS Foundation Trust

SUMMER 2015 ISSUE 34

You are invited to the Annual Members' Meeting 2015

I am delighted to invite you to the **Sheffield Teaching Hospitals Annual** Members' Meeting to hear about some developments which have taken place over the past 12 months. You will also hear about how well we have performed, where we hope to make further improvements and how we have spent the money we were given.

As part of the event you will also have the chance to see some of the innovative medical research which is being undertaken here in

Sheffield. Much of which promises to be the medical breakthroughs of the future for conditions such as motor neurone disease, epilepsy, bone disease and much more.

The meeting will be held in Lecture Theatre 2, Medical Education Centre, Northern General Hospital, From 12.30 to 3.30pm on the 23rd September.

After the short meeting, you are invited to take a walk around our interactive and informative stalls which will showcase

from across the Trust.

To book a place at the meeting please complete the slip on the back page, email: jane.pellegrina@sth.nhs.uk or call Jane Pellegrina on 0114 2714322 by 21st September 2015. Registration and coffee will be from 12.30pm onwards with a light lunch to follow the AGM.

This special edition of Good Health magazine also includes a summary of key information contained in the Annual

provide an update ahead of the event. Full versions of the report are available online at www.sth. nhs.uk/about-us/ official publications.

I look forward to seeing you at the meeting and thank you for your ongoing support for Sheffield Teaching Hospitals NHS Foundation Trust.

Tony Pedder OBE, Chairman



Results of elections for governors

This year's elections ran from 2 to 20 June. The votes have now been counted and we are pleased to announce the results:

 Constituency
 Number of candidates
 Elected or Re-elected candidates

 Public South West
 2
 Spencer Pitfield

 Public South East
 2
 Joyce Justice lan Merriman

 Public West
 1
 Lewis Noble

 Patient
 4
 Kath Parker Michael Warner Dick Williams

The elections were conducted on behalf of the Trust by Electoral Reform Services in accordance with the rules set out in the Trust's Constitution using the single transferable vote electoral system.

The Trust would like to thank all the candidates for taking part and to congratulate the successful candidates. Also many thanks to all our Members who voted.

Governors re-elected by members for a further three year term of office are:



Kath Parker - Patient Governor

May I take this opportunity to thank the members for voting for me for a further 3 years and allowing me to continue the role of Patient Governor.

It is a privilege to continue in this role and I look forward to continuing the work I have started and to be involved in new projects.

There will be difficult challenges ahead in the NHS and in this role Governors can try and help the Trust face those challenges.

Without the membership, this role would be difficult to fulfil, as we rely on feedback both positive and negative. We are keen to hear your views to improve the patient experience.



Joyce Justice - Public Governor, South East Sheffield

I was overjoyed at being re-elected as a governor and wish to thank everybody in South East Sheffield who voted for me. Having now been a governor for 3 years I have extended my knowledge and experience and am looking forward to another 3 years of involvement with patients and working

with the Trust. I am passionate about the NHS and feel that communication and research are very important. As a patient I am very impressed with the changes that are taking place in our hospitals in order to better patient care.

Michael Warner, Patient Governor

Michael Warner, was born and has lived in Sheffield for most of his life. He became a Member of the Trust in 2009 and decided to stand for election as he believes that local people should have a voice in the way their health services are provided.



Why do we ave Governors Find out more

about what Governors do on

Governors Newly Elected by members for a three year term of office

Ian Merriman - Public Governor, South East Sheffield

As a newly elected Governor I'm looking forward enthusiastically to my term of office. I consider it a privilege that will enable me to contribute further towards the wellbeing of patients and carers. As a hospital volunteer, I currently visit patients prior to surgery on the Chesterman wards at the Northern General Hospital and I'm also involved with the Stroke Unit at the Royal Hallamshire Hospital where, as a carer for a stroke victim, I talk to groups of nurses, carers and social workers.



Before retiring I was in engineering from a hands-on craftsman to a company director.

I believe I'm a people person and engage with individuals from all walks of life, hopefully giving them confidence to speak out. I am entrusted with the role as Governor and will serve to the best of my ability.

Lewis Noble -Public Governor, West Sheffield

I am delighted to have been elected as a Governor and I look forward to my time ahead in this role. There are many challenges ahead, for Sheffield Teaching Hospitals NHS Foundation

Trust and for members of our Constituency, as we try and deal with the pressures on our services and community. I hope that my previous experience in social care and at the Princess Royal Spinal Injuries Centre will be of use to us all. It is too early at present to say exactly what role I will play, and I look forward to the input of Members and other Governors in clarifying the priorities.

Spencer Pitfield - Public Governor, South West Sheffield

It is a great honour to be elected by the people of South West Sheffield to serve as a Public Governor. Thank you to all Trust members who entrusted their vote of support to me.

I care passionately about our local Trust and the crucial role it plays in all peoples' lives here in Sheffield and the wider community. Over

the next 3 years I will particularly focus on improving care, enhancing personal dignity and privacy, together with driving up still further standards of cleanliness.

In everything I do I will work closely with all people to make sure your views are clearly reflected and heard at the highest levels. Together we can and will make our Trust even better in the truly lifesaving work it does for our communities on our behalf.

Dick Williams -Patient Governor

Sheffield has one of the largest and busiest NHS Foundation Trusts in the country, seeing getting on for 2 million million patients. WOW!

Having just recently retired, and in order to avoid seizing

up, I have, here in Sheffield where I have lived for 23 years, and with your help, been elected as a Patient Governor and I thank you for that support.

Well, in just a week or so since being elected I have read enough and received sufficient emails to realise how much I need to learn. There is more than I perhaps imagined!

However, I like to believe I am a good listener and will strive to learn from everyone and become useful.

I will welcome any help and support and if we meet I do hope you will tell me what it is you are concerned about and air any suggestions which may serve to improve the service.

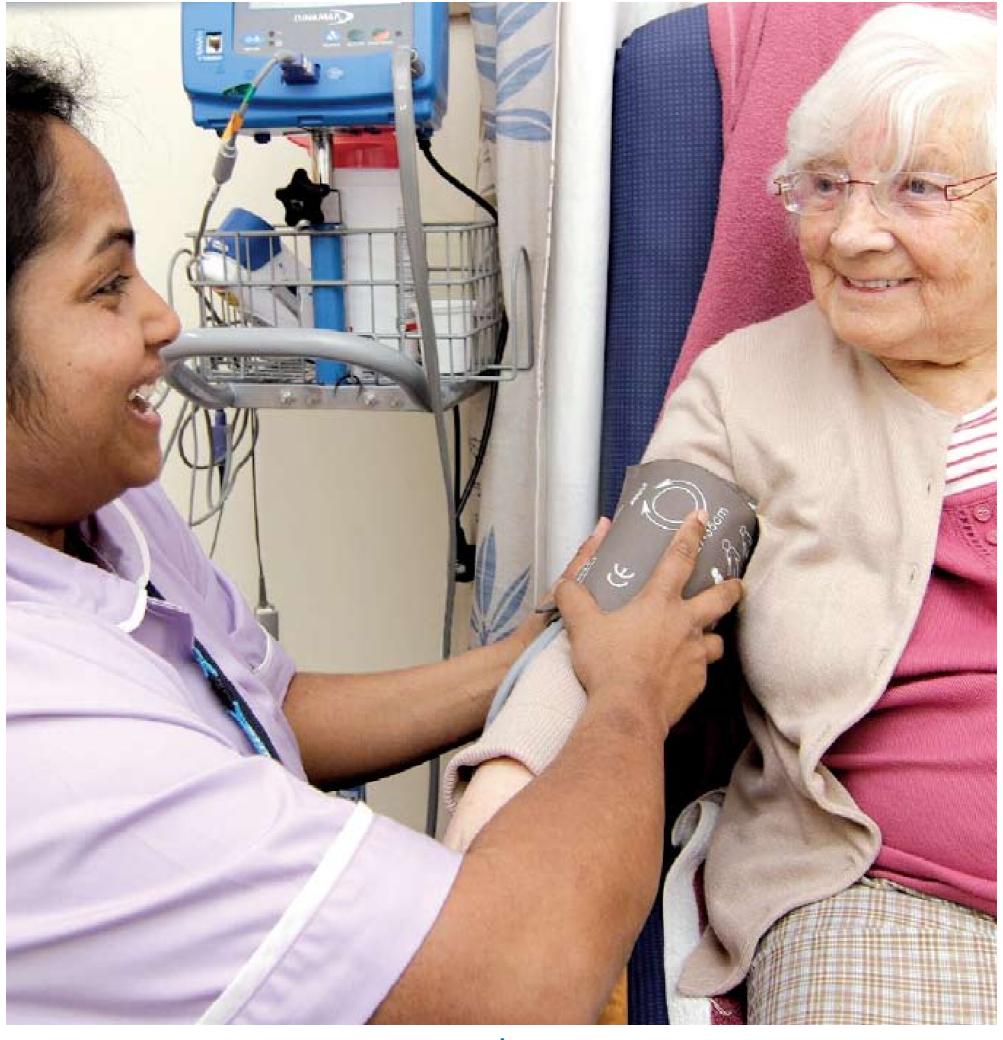
I have, myself, been at the 'sharp end' as a patient so have a few ideas of my own already.

I look forward to the challenges ahead. Thanks again for your support so far.



Making a difference

A summary of our Quality Report plus key information about our performance and future priorities.



Making a Difference

At Sheffield Teaching Hospitals NHS Foundation Trust we remain committed to delivering good clinical outcomes and a high standard of patient experience both in our hospitals and in the community. Thanks to the dedication and professionalism of our staff, volunteers and partners we have a strong track record in this area. We are never complacent and continually look to adopt best practice, drive innovation and most importantly learn and improve when we do not meet the high standards we have set for ourselves.

This drive for improvement is embodied within the Trust's Corporate Strategy 'Making a Difference'. The strategy outlines five overarching aims:

- ✓ Deliver the best clinical outcomes
- Provide patient centred services
- Employ caring and cared for staff



- ✓ Spend public money wisely
- Deliver excellent research, education and innovation.

In summary our priority is to do all we can to continually implement quality improvement initiatives that further enhance the safety, experience and clinical outcomes for all our patients.

However, the NHS nationally is currently operating within a very tough financial climate and our Trust is also seeing unprecedented increases in demand for both emergency and planned care. This was evident in the most extreme sense during last winter when we saw record numbers of patients who needed emergency care and admission to hospital.

With the support of our staff and partners we are addressing these financial and demand challenges by adopting new ways of working, forging partnerships with other health and social care providers and continuing to engage our staff by actively pursuing a culture of innovation and involvement. As a consequence, I am pleased to report that the Trust has continued to perform very well in 2014/15 and has made good progress against our quality priorities for last year (see page 3 for more details).

It was exceptionally pleasing that national and local survey results during 2014/15 consistently showed that the majority of our patients and staff would recommend our Trust as a place to receive care and to work (see page 6 for more details).

We have also pioneered new treatments for multiple sclerosis, cancer and many long term conditions through innovative research trials and we have continued to introduce new equipment to ensure we stay at the leading edge of medical practice.

Despite the continuing difficult economic climate, and thanks to the efforts of our staff through their ongoing focus on delivering excellent care efficiently, the Trust has performed well again financially which is important if we want to keep investing in improvements in our care, technology and facilities (see page 7 for more details)

I hope you find the following pages interesting and you can be assured we will all continue to work hard to provide you with the best care possible.

Sir Andrew Cash, Chief Executive

Andrew Cach.

Safe, High Quality Care

Providing safe, high quality care is our top priority and most of the time we achieve or exceed our patient's expectations.

During the year we have met almost all the national quality standards required but we want to really make a difference in the areas which we know mean the most to you and your family.

We listen to your feedback, complaints and suggestions and whilst the majority of our patients are very satisfied with their care, we also know that there are always areas where we can do even better.

That is why every year we discuss with patients, staff, Trust Governors, Commissioners of healthcare services, Healthier Communities and Adult Social Care Scrutiny Committee and Healthwatch the areas where they feel we should focus extra effort to resolve an issue or make things even better.

This is brought together into a document called the Quality Report which gives information on a number of quality standards and sets out our priorities for the coming year and how we performed in previous years.

The information on the following page explains the areas we particularly focussed on, what we achieved and where there is more to be done. The Quality Report is available on the Sheffield Teaching Hospitals NHS Foundation Trust website (www.sth.nhs.uk) or by calling 0114 2714322.



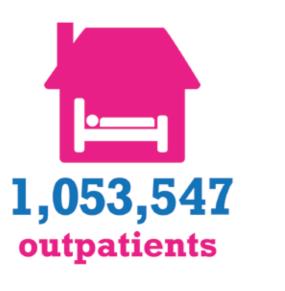
How did we perform last year (2014/15)?

Every year the Trust sets priorities for improvement which are monitored and compared to how we performed in that area in the previous year.

The following table shows how we did in 2014/15. Where we have achieved = ; stayed the same = ; where improvements are still required = ;

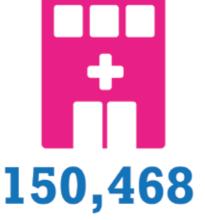
Giving patients a voice - Make it easier to communicate with the organisation. During 2014/15, 9,103 'Frequent Feedback' surveys were completed, this compared with 6,819 during 2013/14. 'Frequent Feedback' surveys were introduced into Community Services in January 2015 to give more patients the opportunity to share with us their comments about the care the Trust provided.	
We have continued to use the Friends and Family Test to gain patient views. This was initially piloted in a few areas but we have rolled the survey out across the Trust during 2014/15.	
Introduce electronic discharge letters for GPs. It is important that we work closely with GP's in order for patients to receive joined up care once they are discharged from hospital. We therefore prioritised improving the discharge information available to GPs. The use of e-discharge summaries was introduced which enable clinicians to complete an electronic discharge template to give GP's an update on patients condition, medication and treatment in hospital. This is now fully embedded within the Trust and GP practices.	
Optimise Length of time patients stay in hospital. The Trust has also continued work to reduce the number of days patients spend in hospital once they are medically fit. Improvement projects such as Discharge to Assess (which allows patients to be assessed in their own home rather than waiting for assessments to be completed in hospital), improving patient transport and developing additional ambulatory pathways have all been successful during 2014/15.	
A number of Directorates are being supported by The Service Improvement Team to improve patient flow. Improving ward processes will be a major focus for 2015.	
Improve Dementia awareness. The Trust is dedicated to improving dementia awareness with our staff and meeting the needs of patients and carers with this condition. The 'All About Me Booklet', which describes the patient's preferences, needs and routines, was launched during Dementia Awareness week in May 2014. The booklet is available to patients on all wards, with particular focus on those wards where dementia is most prevalent. A Dementia Champion Network has been developed across the Trust during 2014/15. In 2015/16 we plan on accrediting all clinical areas that have a dementia champion.	
Reduce the number of operations cancelled on the day of surgery. Work has continued to reduce the number of operations cancelled on the day it is scheduled to take place. Orthopaedics and General Surgery now use a checklist three days before the date of admission, to confirm that a patient is fit, willing and able to attend for surgery as planned. Work is ongoing with all elective specialties to cascade the introduction of the checklist. For 2015/16 a process where the Operating Theatre Patient Flow Co-ordinators work with Directorate teams, to understand and help resolve the root cause of the cancellations, will be developed.	
Reduction in the number of patients who have pressure ulcers. The overall proportion of patients with pressure ulcers including those acquired whilst receiving care from the Trust and those prior to receiving care has increased from 5.72% in 2013/14 to 6.15% in 2014/15. In order to try to reduce the prevalence of pressure ulcers further, improvements are planned. This includes the early identification of patients at risk of developing a pressure ulcer, early intervention by the Pressure Ulcer Prevention Team, and targeted work with clinical areas.	
In November 2014 the 'Time to Turn' awareness campaign launched. This coincided with the launch of a Pressure Care Patient Information leaflet, the development of staff educational resources and changes to nursing care records to promote accurate documentation of skin conditions.	
Improve discharge information for patients. Discharge information is now routinely checked in all leaflets before publication. As all leaflets are checked on a two year rolling basis, the work to check existing leaflets for discharge information is on track to be completed by the summer of 2015. Regular reviews of all patient information relating to discharge now takes place to ensure the most up to date information is available.	
To ensure every hospital inpatient knows the name of the consultant and nurse responsible for their care. The Trust has piloted free standing boards (placed on a patient's table or bedside locker) in some areas to ensure the patient can see the name of their consultant and the nurse responsible for their care. The boards also have space on the back for staff to write "what matters to the patient today" with the aim of improving communication and meeting the patient's specific needs. The pilot evaluated well by both patients and staff. The use of the free standing boards was launched Trustwide in April 2015.	
To improve complainant satisfaction with the complaints process. From April 2014, the Trust, participated in the Patients Association complainant Satisfaction Survey. All complainants whose complaint was considered to be closed were invited to participate in the survey. At the end of January 2015 the Patients Association had received 164 responses for the Trust Following the results a detailed action plan has been agreed that involves significant changes to the complaints process. These changes are currently being piloted in Urology and General Surgery.	
To review mortality rates at the weekend and to focus improvement activity where necessary. The Trust has continued to review mortality rates by day of the week during 2014/15. Our Hospital Standardised Mortality Ratio for all admissions for each day of the week, including weekends is 'as expected' when compared to the national average. A detailed weekend mortality review was undertaken 2014/15 and further analysis will take place during 2015/16.	
To review the impact of waiting times on the patient experience. During 2014/15 a survey was designed to better understand the personal experience of patients who had waited over 18 weeks for their admission or treatment. Findings have prompted the Trust to look at ways of improving communication with all patients waiting for care.	

We are one of the largest and busiest trusts in the country; over the past year we have seen and treated...









accident and emergency attendances



925,939

contacts with community patients.

Working with our partners

Strong partnership working continued to be important to the Trust in 2014/15. The Trust is involved in a number of initiatives, locally, regionally and nationally to strengthen not only our services but the whole of Sheffield's health economy.

Working with local GPs, hospitals, mental and community health services, voluntary organisations and the local council under Right First Time (RFT), we aim to give patients access to the best healthcare services through focusing on their physical and

mental health as well as their social care needs in a more seamless way. As a key partner, we ensure that all patients:

- Are supported in their local community wherever possible by joined up, high quality, responsive health and care services
- Receive continuity of care, shared decision making and a lifelong, personalised, preventative approach to health and wellbeing.

We're also in the Working Together Partnership of seven hospital trusts across South and Mid Yorkshire and North Derbyshire. Working collaboratively on our common issues, we are able to deliver benefits we wouldn't necessarily achieve alone.

We have been a part of the Working Together Partnership for two years now and have already achieved some great successes. We achieved a £400k saving on the procurement of examination gloves and are now, thanks to an agreement with ICE OpenNet, able to share test result information safely and securely between the



Employing Caring and Cared for Staff

Our key asset is our staff and their dedication and commitment is a source of great strength for the Trust. During the last 12 months the Trust has continued to encourage more of our staff to be actively engaged and involved in decisions, setting the future direction of the organisation and innovations. This has been well received and is reflected in a significant improvement to the Trust's staff engagement score in the national staff survey. We are now one of the top 20% of NHS Trusts with the highest staff engagement results. We are committed to continuing this important work during 2015/16 because we believe our staff are the key to the delivery of excellent patient care.

In November the Trust launched 'Listening into Action' (LiA) which has been adopted by a number of NHS Trusts to empower and involve staff in making improvements for patients. As a first step 'Big Conversation' suggestion events took place with the Chief Executive to help identify 'what matters to staff'. The invaluable feedback gained from these events has now been condensed into key themes and priorities to allow nominated groups of staff to focus on action plans for specific areas.

Keeping our patients safe

Providing safe, high quality care is our top priority and most of the time we achieve or exceed our patient's expectations.

It is recognised that an important clinical quality indicator is the mortality rate after surgery and for many years the Trust has a consistently 'lower or as expected' mortality rate. This is testament to the skill and care of our teams.

During 2014/15 we also continued to review weekend mortality rates. Our Hospital Standardised Mortality Ratio for weekday and weekend

emergency admissions is also both 'within expected range'. However, given the importance of mortality rates and continual monitoring to ensure that any variance can be spotted quickly and acted upon, it has been agreed that this will again be a priority for improvement for 2015/16.

We also consider rigorous infection control and clean facilities to be fundamental to our care standards.

We saw a further reduction in cases of C.difficile in 2014/15. We continue to work hard to minimise the chances of patients acquiring other hospital acquired infections such as Norovirus and MRSA.



solution of the street of the

Trust shortlisted for record number of safety awards

The Trust has been shortlisted for a record number of national Patient Safety Awards during the past year more than any other NHS organisation in the country.

Just one of the teams recognised was the specialist staff at Weston Park Hospital who are playing a pivotal role in helping improve the quality of life of patients with malignant spinal cord compression were recognised.

Through the team's work patients now receive early treatment and rehabilitation that focuses on achieving patients' priorities such as improving functional ability, increasing independence and timely discharge from hospital.

Keeping waiting times low

We know that ensuring waiting times are kept as low as possible is important to our patients. We also want to make sure our waiting times processes and procedures are robust and enable our patients to receive swift and appropriate treatment. The average waiting time for nonurgent care at the Trust is eight weeks or less and all the cancer treatment waiting time standards are consistently met.

Throughout 2014/15, work continued to reduce the number of operations that get cancelled. In 2014/15, 6.6% of planned operations were cancelled on the day of surgery due to clinical and non-clinical reasons. Although we are still short of our target to reduce this figure to 4%, the percentage of cancellations is decreasing year on year.

The Trust has also continued work to reduce the number of days patients spend in hospital once they are medically fit. Improvement projects such as Discharge to Assess (which allows patients to be assessed in their own home rather than waiting for assessments to be completed in hospital), improving patient transport and developing additional ambulatory pathways have all been successful during 2014/15.

Care close to home

A considerable amount of our work is now carried out in the local community and indeed we see a third of our patients outside the hospitals environment. We continue to work closely with GPs, Social Services and voluntary teams to move towards more integrated care such as the new Virtual Ward which was introduced last year.

The virtual ward has helped improve the quality of life for patients who might otherwise have been admitted to hospital or ended up in long term care. Patients were given access to a team of community based heathcare professionals including GPs, community matron, pharmacists and social workers who met weekly to identify ongoing health needs, set goals and develop plans to improve the patient's health and wellbeing. By creating the virtual ward the team are able to resolve and prevent problems that left alone could have resulted in an admission to hospital.

Patients praise care in our hospitals in national survey

A national survey by the Care Quality Commission has shown Sheffield Teaching Hospitals NHS Foundation Trust continues to provide high quality care and a good patient experience.

Over 81% of the 308 inpatients surveyed in 2014 at the Royal Hallamshire, Weston Park and Northern General Hospitals rated their experience as 8 out of 10 or better and 30% rated their experience as 10 out of 10.

Over 98% of the patients said the wards were clean.

The overall experience of patients in the A&E Department at the Northern General Hospital, was highlighted as better than the national average, as was the amount of time patients have to discuss their health or medical problem with the doctor or nurse.

Mr Alan Birchall, 66 from Chapeltown is just one patient who was pleased with the care he had received. Mr Birchall is set to make a full recovery after suffering a stroke thanks to emergency clot busting drug treatment provided at the Northern General Hospital and further care at the Royal Hallamshire Hospital's specialist Stroke Unit. The retired dad of two said: "The care was absolutely fantastic, all the staff were extremely caring and thanks to the excellent treatment I received I was able to go home in just a few days. I feel so lucky that I can speak, read and move thanks to the hospital's care."

Other highlights from the recently published report included: 94% of patients always had enough privacy when being examined or treated, 90% always had confidence and trust in doctors and 92% of patients felt they were treated with respect and dignity while in hospital.

As well as the positive feedback, the survey also highlighted some areas where patients would like to see further improvements, including patients not being disturbed by noise at night from other patients.

Andrew Cash, Chief Executive said:

"Our staff work extremely hard on a daily basis to deliver the best possible care and the survey results are testament to this dedication. However we are never complacent and we will also be exploring where we can make further improvements based on the survey responses."

Fresh food brings healthy recognition for catering team



Sheffield Teaching Hospitals' catering team recently received an award in recognition of its ongoing commitment to serving fresh and healthy food.

The catering department won a Bronze Catering Mark under the Soil Association's Food For Life scheme.

The award is an independent endorsement that the food served at the Trust uses fresh ingredients, free from unhealthy additives and trans fats, and meets nutritional and animal welfare standards. It also recognises that the Trust is working to continuously improve the food it serves.

The award covers all the food served to patients at the Northern General Hospital, Royal Hallamshire Hospital, Weston Park Hospital and Jessop Wing. 75% of meals are freshly prepared from unprocessed ingredients, all meat is farm assured, only free range eggs and fresh whole milk is used in cooking and fish is sustainably sourced.

"Providing good food is a clinical priority and we continue to strive to achieve the highest standards in supporting excellence in hospital care. Our work continues now for silver accreditation."



Alan Birchall was pleased with the care he received after suffering a stroke

Listening to Our Patients

We are committed to listening to our patients and learning from their feedback to make our services even better.

The Trust continues to undertake a wide range of patient feedback initiatives regarding the services they receive. Our extensive programme of local surveys has continued, with around 750 patients each month participating in the 'Frequent Feedback' survey programme in which the views of patients are gathered by trained volunteers.

The Trust values complaints as an important source of patient feedback. We provide a range of ways in which patients and families can raise concerns or make complaints. During 2014/15 we received 1,346 concerns and enquiries which we were able to respond to within two working days.

We remain committed to learning from, and taking action as a result of, complaint investigations. A formal process is in place which monitors and follows up actions agreed to ensure that any changes have been made and have been implemented as planned. This process is supported by Trust Governors who visit wards and departments to 'spot check' progress against action plans.

The Friends and Family Test, which was introduced in 2013, asks patients whether they would recommend departments to their friends and family if they needed similar care or treatment. This means every patient in these wards and departments is able to give quick feedback on the quality of the care they receive, giving the Trust a better understanding of the needs of their patients and enabling improvements. The Test continues to be used in Inpatients, A&E and



Maternity Services and was rolled out to Outpatient and Day Case Services in October 2014 and to Community Services in January 2015 - achieving the Commissioning for Quality and Innovation target for early implementation ahead of the national deadline of April 2015.

Investing in our future

During 2014/15 we invested £27million in new facilities and developments including refurbishing wards and operating theatres. We installed state of the art catering facilities to support our ongoing drive to ensure patients have good nutrition and meals made with local produce wherever possible. We opened a new Research Department at the Hallamshire Hospital, provided additional car parking spaces at the Northern General Hospital and built a new theatre in the Hand Unit to enable patients having minor operations to have their procedure

without having to go to the main theatres. Another key development is the new Helipad at the Northern General Hospital which has already attracted such generous support from donors through Sheffield Hospitals Charity and local companies.

The most significant investment during 2014/15 was in our Transformation Through Technology change programme. We are investing more than £35million to transform many of the IT systems we have in place at the moment so that we can continue to provide high quality, safe and responsive

care to our patients. We are a trailblazer in so many areas thanks to the innovation and dedication of our clinical and non-clinical colleagues across hospital and community care. However this is often hindered rather than helped by some of the IT systems which we have had for many years. But we don't want to just update, we want to transform our organisation into one which has cutting edge systems to support the transformation in care we want and need to deliver over coming years. The key IT systems which will enable the change are due to go live in Autumn 2015.



Our Finances



Neil Priestley, Finance Director Despite the continuing difficult economic climate, the Trust performed well again financially.

Our total income last year was just over a £1 billion (£1,002,148k) and we declared a surplus of £8,391.3k. Any surplus we make enables us to invest in new facilities and equipment.

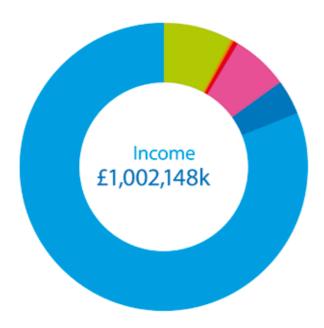
The growth in income from patient services is due to treating a higher number of patients and the majority of our costs are associated with paying the 16.000 staff who work for the Trust. The diagrams below give a summary breakdown of where our money comes from and how it is spent. Full details can be found in the Annual Report and Accounts which is available at www.sth.nhs.uk.

Overall our 2014/15 financial results are very satisfactory, particularly when set alongside excellent service performance and the challenging financial environment.

However, along with the rest of the NHS, we face an immensely difficult future as demands on services continue to grow and funding seems likely to remain constrained.

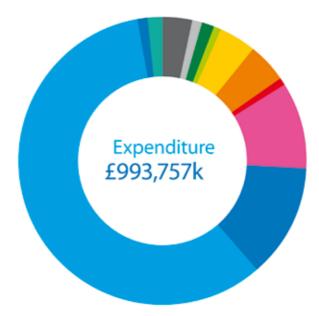
We remain committed to delivering high quality services and to achieving real efficiency savings to address the future financial pressures and to protect and invest in our services.

Where our money comes from



- Clinical Commissioning Groups, NHS England and The Department of Health – provision of healthcare £814,584 k
- Research and Development £38,133 k
- Education and Training £63,246 k
- Local Authorities £7,261 k
- NHS other £1,788 k
- Received from NHS Charities and Other Bodies £147 k
- Other income £76,989 k

How we spend our money



- Wages and salaries £582,232 k
- Drug costs £125,853 k
- Supplies and services clinical £95,821 k
- Supplies and services general £8,286 k
- Premises and Establishment Costs (including Transport)
 £46,478 k
- Depreciation and Amortisation and Impairment Charges £39,719 k
- Clinical Negligence £9,999 k
- Financing Costs £13,009 k
- Research and Development £30,777 k
- Services from NHS bodies £16,577 k
- Purchase of Healthcare Non-NHS £13,311 k
- Other Costs £11,695 k

What our priorities are for this year (2015/16)

The following priorities have been agreed by the Quality Report Steering Group in conjunction with patients, clinicians, Governors, Healthwatch and NHS Sheffield CCG. The Trust has considered hospital and community service priorities for the coming year choosing three areas to focus on which span the domains of patient safety, clinical effectiveness and patient experience.

Priorities for 2015/16 are:

- To improve the safety and quality of care provided by the Trust in all settings with the aim of reducing preventable harm and improving quality.
- To improve how complaints are managed and learned from within Sheffield Teaching Hospitals.
- To improve staff engagement by using the tools and principles of Listening into Action (LiA).

In addition to these priorities for improvement there are many quality improvement proposals in the Sheffield Teaching Hospitals Quality Strategy.



Anyone can become a member by emailing jane.pelligrina@sth.nhs.uk

Pioneering medical breakthroughs



Improving patient care through high quality research and innovation is central to everything we do, helping us understand how diseases work and enabling us to deliver better and more advanced treatments and services quicker.

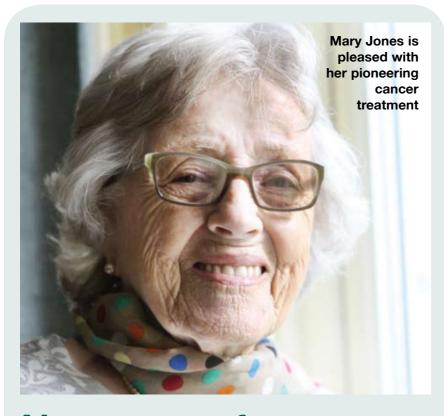
In 2014 the Trust was named by the National Institute for Health Research's Clinical Research Network as one of the leading NHS Trusts in the country in terms of research, with 16% more patients taking part in clinical research compared to 2013/14.

By working with key partners, we are continuing to pursue major medical breakthroughs that will improve treatments for patients, including a new stem cell treatment, which was the first to reverse the symptoms of multiple sclerosis in sufferers who failed to respond to standard therapies (see below).

Other world-leading research includes the use of 'conversational analysis' to distinguish between dementia and other causes of memory loss, securing a £2 million National Institute for Health Research Programme Grant

to develop and test new models of care for cystic fibrosis sufferers in 12 cystic fibrosis centres across the country, and demonstrating for the first time ever that diabetic nerve pain was more closely linked to the central nervous system than previously thought.

At national level, the Trust has been recognised through a range of prestigious awards and accolades, including scooping top accolades in the cancer care, diabetes care and changing culture categories at the Health Service Journal's Patient Safety and Care Awards.



New-state-ofthe-art therapies offered to cancer patients in Sheffield for the first time

Two cutting-edge cancer treatments using targeted radioactive therapy injections to destroy cancer cells are now being offered to patients with rare neuroendocrine tumours and patients with prostate cancer at Weston Park Hospital.

The first treatment, known as dotatate therapy, will be given to patients with neuroendocrine tumours.

These relatively rare tumours typically do not respond well to standard anticancer treatments such as chemotherapy.

The second is Xofigo, a pioneering new treatment used to treat advanced forms of prostate cancer which has spread to the bones.

The new treatments are being supported by the opening of a recently refurbished nuclear medicine therapy suite at Weston Park Hospital.

Breakthrough in Multiple Sclerosis treatment

A pioneering new stem cell treatment 'rebooting' the immune system in some multiple sclerosis sufferers is being hailed as an encouraging step forward in the treatment of the disease in sufferers who fail to respond to standard therapies.

The treatment, which was developed to treat cancers such as leukaemia and lymphoma is being used at the Royal Hallamshire Hospital.

The treatment, known as autologous haematopoietic stem cell transplantation (HSCT), aims to destroy the dysfunctional immune system causing the MS with a high dose of chemotherapy. This is then rebuilt with stem cells taken from the patient's own blood which are harvested and stored before being transplanted back into the patient's body.

The harvested stem cells are then infused back into the body where they grow new blood and bone marrow cells after two to three weeks.

The regenerating immune system is effectively 'rebooted' allowing the inflammation in the brain and spinal cord to subside and healing to occur. This resulted in some wheelchair-bound patients to regain use of their legs. One patient, who had been blind, was able to see again.

Professor Basil Sharrack, Consultant Neurologist said: "Since we started using this treatment in a small number of patients with severe inflammatory disease who had failed to respond to standard therapies, some of the results that we have seen have been very encouraging."

Professor John Snowden, Consultant Haematologist and Director of Bone Marrow Transplantation at Sheffield Teaching Hospitals said: "The procedure is very similar to what we have used for many years to treat cancers of the blood and bone marrow. We are not using the therapy as a means of regenerating damaged nervous or other tissues. Instead the procedure is more of an intensive form of "rebooting" the immune system."



Why do we have Governors?

Governors represent both patients and the public.

We see ourselves as being 'critical friends' to the Board of Directors who are ultimately responsible for running the Trust, and also to the staff at all levels who deliver the services of the Trust. We spend quite a lot of time meeting and talking to as many of you, our constituents, as we can. This maybe at an event, on a ward, in a clinic or at a bus stop. It is your concerns and appreciations that we are here to represent.

As a team we are responsible for holding the Non-Executive Directors (NEDs) to account for the Trust's performance, appointing and/or removing the chairman and NEDs, and determining their pay, terms and conditions.

There are a number of mandatory duties for all governors including the quarterly Council of Governors' meetings. These meetings are attended by the Trust's Board members to advise us of their work and answer any questions or concerns we might raise. The meetings are open to the public and you are very welcome to attend – please see Dates for your Diary on this page. We have our own Forum meetings and training and development sessions in which we are all expected to participate.

In addition to these duties most governors join various Trust committees such as the Patient Experience Committee, Biomedical Research, Nutrition Steering Group and Catering Standards and Charitable Funds Management Group. We take part in Patient-Led Assessments of the Care Environment, Infection Prevention and Control Group and the Trust's Mental Health Committee. We meet regularly with the Chairman and have quarterly briefings with the Director of Finance.

We are each now assigned to specific Trust areas, for example

Surgical Services, Primary and Community Services, Emergency Care, where we help to provide a patient perspective on the department's activities. Sometimes we get involved in specific projects to improve patients' experiences – this could be their time in hospital, the planning for discharge or their care in the community and as an outpatient.

Being able to use your input and views to inform and feedback to staff is one of the highlights of our role, together with finding out so much about the range and scope of the Trust.

As governors we have no special privileges, we don't deal with specific complaints and can't 'fix' things for people. We can however try and help the Board understand from the patient's point of view and help the patient and public understand how the Trust works.

We are holding our Annual

Members' Meeting (AMM) this year on 23 September where you can find out more and share your concerns and thoughts. Full details of the AMM are on the front page, and please complete the form below and send or email to Jane Pellegrina if you would like to attend.

Hilary Chapman, Chief Nurse, added: "Governors are an invaluable resource to the Board. They assist in the development of ideas, advise on key issues and act as the Trust's 'eyes and ears' in the community. I personally work with them extensively and enjoy and value listening to their input on a variety of projects, agendas and tasks. Indeed, governors bring a really different and challenging perspective to Trust committees and interview panels. They are the conduit to our members, articulating their needs and concerns and particularly help us to share information back and forth from within the local community.'



Jacquie Kirk



Anne Eckford

Dates for your diary 2015

MEETING	DATE	TIME	VENUE	
Council of Governors Meeting	1 September	5:00 pm	Undergraduate Common Room, Medical Education Centre, Northern General Hospital	
Annual Members' Meeting	23 September	12 noon	Medical Education Centre, Northern General Hospital	
Members' Talk for World Mental Health Week	6 October	5:30 pm	Medical School, Royal Hallamshire Hospital	
Members' Event – All About Research	20 October	11:00 am	Medical Education Centre, Northern General Hospital	
Council of Governors Meeting	1 December	5:00 pm	Undergraduate Common Room, Medical Education Centre, Northern General Hospital	

Trust members and members of the public are invited to attend these meetings and events. For more information or to book a place please telephone Jane Pellegrina in the Membership Office on 0114 2714322

For more information about the Council of Governors meetings please see http://www.sth.nhs.uk/members/governors-council/governors-council-meetings/2015

To book a place at the annual members' meeting please email Jane.Pellegrina@sth.nhs.uk; call Jane Pellegrina on 0114 2714322 or fill in and return this form

RSVP – Annual Members' Meeting, Lecture Theatre 2, Medical Education Centre, Northern General Hospital, 23rd September 2015.

Please cut out the Members' response slip and post to:

NHS Foundations Trust Office,
Sheffield Teaching Hospitals NHS Foundation Trust,

FREEPOST NAT9274, SHEFFIELD S5 7ZZ

I (Name) would like to attend the Annual Members' Meeting

Contact Number