Come to our Annual Members’ Meeting

• A chance to visit our state-of-the-art laboratories
• Meet the governors who represent you
• Find out about the latest developments at the Trust
I am delighted to invite you to this year’s Annual Members’ Meeting of Sheffield Teaching Hospitals NHS Foundation Trust to hear about developments over the last 12 months. You will hear about how well we have performed, where we hope to make further improvements and how we have spent the money we were given. You will also be able to visit our marketplace of stalls showcasing the exciting work and new initiatives taking place across the Trust, and the chance to meet the Governors who represent you. There will also be the opportunity to visit our state-of-the-art laboratories which carry out vital tests and diagnostic work.

The Annual Members’ Meeting will take place on Wednesday 12th September at the Medical Education Centre at the Northern General Hospital. Registration is from 10am, with the AGM at 11am and the marketplace from 12 noon.

To book a place at the Annual Members’ Meeting please email jane.pellegrina@sth.nhs.uk, call Jane Pellegrina on 0114 271 4322 or complete and return this form by 6 September 2018.

RSVP: STH Annual Members’ Meeting, Medical Education Centre, Northern General Hospital, 12th September 2018.

I would like to book [ ] places at the meeting.

Name(s):
Address:
Phone:
Email:

Do you require wheelchair access? [ ] Yes [ ] No
Do you have any special dietary requirements? [ ] Yes [ ] No
Would you like to visit our laboratories? [ ] Yes [ ] No

(places will be allocated on a first come first served basis)

Please return this form to:
Jane Pellegrina
The Foundation Trust Office
Sheffield Teaching Hospitals NHS Foundation Trust
Clock Tower Building
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Email: Jane.Pellegrina@sth.nhs.uk

What’s inside...

Page 3 Chief Executive and Chief Nurse retire Maureen still nursing at 81
Page 4 NHS70 Celebrations
Page 5 Charity Will Month in September Call the Midwife Bike Ride raises over £12,500 for birthing pools appeal
Page 6 Awards recognise our outstanding staff Thanking volunteers for ‘Going the Extra Mile’
Page 7 A summary of our Quality Report 2017-18
Page 20 Patients praise hospital care Positive feedback from our inspection
Page 21 Governors visit the Charles Clifford Dental Hospital Innovative neck collar developed to help motor neurone disease patients
Page 22 Results of Governor elections
Page 24 Dates for your diary

The way things were
Chief Executive and Chief Nurse retire

The Trust's Chief Executive, Sir Andrew Cash, retired in July after 40 years' NHS service.

Sir Andrew had a distinguished career in the NHS, successfully leading one of the biggest mergers of NHS acute Trusts in 2001 when he brought together the five acute hospitals in Sheffield to create Sheffield Teaching Hospitals NHS Trust. The organisation then went on to become one of the first wave NHS Foundation Trusts in 2004. He also guided the successful integration of community health services with the city’s adult acute services in 2011 which resulted in the Trust becoming one of the largest integrated health providers in the NHS.

He received an OBE in 2001 followed by a Knighthood in the Queen’s New Year Honours in 2009. Both awards were in recognition of his services to the NHS.

He will continue to lead the South Yorkshire and Bassetlaw Integrated Care System.

Trust Chairman Tony Pedder said: “We have been incredibly fortunate to have had in Andrew an outstanding Chief Executive. He has led the Trust strongly, always guided by what is right for patients.”

Kirsten Major, Deputy Chief Executive is acting as Interim Chief Executive, following Andrew’s retirement. Recruitment for a permanent Chief Executive will commence in the Autumn.

Chief Nurse Professor Dame Hilary Chapman is also retiring in August after 32 years of nursing.

Hilary is one of the country’s most prominent Chief Nurses, and has made major contributions to health policy, healthcare delivery and system reform, most notably co-leading on the development of the Safer Nursing Care Toolkit, which is now widely used in hospitals around the UK to help determine safe nurse staffing levels.

Hilary said: “The decision to retire has been a hard one because there is no better career than nursing. To lead such a fantastic team of nurses and midwives here at Sheffield Teaching Hospitals is an absolute privilege and joy. I have only been able to achieve the things I have because I have worked with incredible teams throughout my working life.”

Tony Pedder said: “Hilary is an excellent role model for all those entering the healthcare professions, and has brought great benefits to the city of Sheffield and the surrounding region through her pursuit of the highest quality of nursing provision.”

Chris Morley has been appointed as Hilary’s replacement and will take up the role in October. Chris was Deputy Chief Nurse at the Trust for seven years before becoming Chief Nurse at The Rotherham NHS Foundation Trust.

Maureen still nursing at 81

Maureen Horton was born before the existence of the NHS and is still working and seeing patients in the community - at the age of 81.

She said: “I retired from full-time nursing at 60, I had a nice week off and then I was sitting on the settee one day and I thought ‘what will I do now.’ So I took up a community bank nursing opportunity and I have been doing it ever since.”

Maureen was born in 1937, 11 years before the introduction of the NHS in 1948, and started her career in 1969 when she worked as a mental health nurse at Middlewood Hospital.

Maureen currently works about 20 hours a week, and in a typical shift will see about eight to ten patients and undertake a broad range of clinical tasks.

“I don’t like sitting about, I have to get out and do something,” she said.

“Sometimes I say to my family I will probably finish this year,’ but they say ‘we know you won’t be able to sit still!’

One of the main changes Maureen has had to get used to during her long career is the introduction of new technology. She said: “It was a bit overwhelming at first, but my colleagues were really good and showed me what to do if I had any difficulties.”

One thing that hasn’t changed, she said, is the dedication of the community staff.

“It is just as good as it ever has been. They work very hard and are very devoted and very good at what they do.”

Proud to make a difference 3
Celebrations mark 70th anniversary of the NHS

July 5th marked the 70th anniversary of the NHS, and the Trust came together with other NHS organisations in the city to celebrate some of the achievements and landmarks since the service was founded in 1948.

A special showcase held at Sheffield Cathedral in the city centre featured a wide range of NHS themed displays and activities, from vintage ambulances to humanoid companion care robots, blood pressure monitoring and research looking into how ice pops could help children undergoing chemotherapy for cancer treatments.

In the evening a service attended by NHS staff and patients was held in the Cathedral.

Within the Trust a range of commemorative activities took place. Among them was a special 1948 themed menu designed by the catering team, a walk around the hospital sites with staff dressed in traditional uniform and an NHS70 flag raising.
Call the Midwife Bike Ride raises over £12,500 for birthing pools appeal

A charity bike ride has raised a fantastic £12,580.48 for Sheffield Hospitals Charity.

The money raised by the Call the Jessops Midwives Charity Bike Ride in May will go towards building new birthing pool rooms in the Jessop Wing.

The event was organised by Amanda Muller, Labour Ward Coordinator at the Jessop Wing, and many Jessop Wing members of staff donned vintage midwife uniforms and got involved to raise funds.

The event was kindly sponsored by GIANT Sheffield Bike Store.

Charity Will Month in September

As Will Month approaches, Sheffield Hospitals Charity is asking more people to consider leaving a donation when they die, helping to leave a lasting contribution to support patients.

To help, it’s teamed up with top city solicitors Bell & Buxton, Rosalind Watchorn, Keebles LLP, Best Solicitors and Foy’s to offer a free will writing service, in return for a suggested donation to the charity.

Thanks to legacy donations, Sheffield Hospitals Charity has already been able to fund vital projects such as research into melanoma cancers, a haematology nurse specialist who cares and supports patients with blood disorders during their treatment, and a support coordinator in the Spinal Injuries Unit who now helps to improve physical development and the wellbeing of patients.

Isla Denoon, Fundraising Team Manager at Sheffield Hospital’s Charity, said: “Writing a will is often forgotten about, but it is one of the most important documents you will ever write. Naturally your first priority will be to look after your loved ones, but you may find there is room to leave a gift to charity. Leaving a gift in your will costs you nothing now, but will help to create a better future, by improving treatment for you, your family and other people living in your community. “Funds from legacy donations have already made a massive difference in enhancing patient care in the city hospitals.” The suggested minimum donation for a single will is the reduced rate of £95, or £135 for two ‘mirror wills’, with all proceeds donated directly to Sheffield Hospitals Charity.

For information visit www.sheffieldhospitalscharity.org.uk/legacies email fundraising@shct.nhs.uk or phone 0114 226 7351.

WIN up to £25,000 by playing Sheffield Hospitals Lottery

Play online today for £1 a week and support local patients.

www.sheffieldhospitalscharity.org.uk/lottery

Players must be 16 or over. Registered Charity No. 1169762

Proud to make a difference
Awards recognise our outstanding staff

Trust Chaplain named ‘most outstanding Muslim woman in South Yorkshire’
Sabia Rehman, the Trust’s Muslim chaplain has been named as the ‘most outstanding Muslim woman in South Yorkshire’ in recognition of her work in hospital and the community.
She won the top Khadija Award at the Al Nisa Awards, which are a celebration of the contribution and achievements of Muslim women in the county.
She was recognised for her innovative and ground-breaking multi-faith work in developing understanding and co-operation between hospital teams and the community.

Head of Integrated Community Care awarded Queen’s Nurse title
Helen Chapman, Head of Integrated Community Care has achieved one of the highest accolades in her profession by being awarded the title of Queen’s Nurse by the Queen’s Nursing Institute.
Helen qualified as a district nurse in 1990 and spent more than 16 years in clinical practice working in south west Sheffield before progressing into leadership roles.

Chief Nurse given leading honour by Royal College of Nursing
The Trust’s Chief Nurse, Professor Dame Hilary Chapman, has been presented with a leading honour by the Royal College of Nursing.
She received a Fellowship at the College’s 2018 Congress for her outstanding commitment to nursing and improving healthcare.

Thanking volunteers for Going the Extra Mile
Hospital volunteers attended a special ‘Going the Extra Mile’ awards ceremony at Sheffield Town Hall to recognise the vital contribution they make to the Trust.
Awards were presented to volunteers in categories including Young People, Welcoming Patients and Visitors, Improving the Experience of Patients, Improving the Experience of Patients, Staff and Visitors, Group Award and One of a Kind.
A full list of award winners is available in the Volunteers’ newsletter, available online at www.sth.nhs.uk/work-for-us/volunteering

The One of a Kind Award went to Robert Newbolt (pictured with Karen Jessop, Deputy Chief Nurse, and Majid Majid, Lord Mayor of Sheffield).
MAKING A DIFFERENCE
A summary of our Quality Report plus key information about our performance and future priorities.
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 standards we have set for ourselves.

This drive for improvement is embodied within the Trust’s recently refreshed 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 our patients. However, the NHS nationally is currently operating within a very tough financial climate and our Trust is also seeing increases in demand for both emergency and planned care.

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 Sheffield Teaching Hospitals NHS Foundation Trust has continued to perform very well in 2017/18 and has made good progress against our quality priorities.

It was exceptionally pleasing that national and local survey results during 2017/18 consistently showed that the majority of our patients and staff would recommend the Trust as a place to receive care and to work.

Indeed our staff won a record number of quality and safety awards throughout the year.

During 2017 we also called upon everyone who works for the Trust to be part of developing our new People Strategy which sets out our vision and plans to ensure Sheffield Teaching Hospitals is a ‘brilliant place to work’ as well as a brilliant place to receive care.

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 OBE
Chief Executive

8 GoodHealth August 2018
WHO WE ARE

We are one of the UK’s biggest and most successful providers of hospital and community based healthcare.

We provide comprehensive NHS services ranging from maternity services to care of the elderly. We provide services to Sheffield, South Yorkshire, Mid Yorkshire and North Derbyshire but also specialist services to all parts of the UK.

We have a long history of providing high quality care, clinical excellence and innovation in medical research and we are proud to have been awarded an overall rating of ‘Good’ following the latest Care Quality Commission inspection.

With around 17,000 employees working within our hospitals and out in the community, we are one of the biggest employers locally. We aim to reflect the diversity of local communities and are proud of our partnerships with local people, patients, neighbouring NHS organisations, local authority and charitable bodies.

Thanks to the professionalism and dedication of all our 17,000 staff, we are proud to have a reputation for delivering high quality care, effective leadership and innovation in both clinical and non-clinical services. Our current Care Quality Commission rating is evidence of this with a ‘Good’ rating across all five domains of: Safe, Caring, Effective, Well led, Responsive with many of our services rated as ‘outstanding’.

Through our partnerships with the University of Sheffield, Sheffield Hallam University, other health and social care providers and industry we remain at the forefront of advancements in clinical services, teaching and research.

Sheffield
Population 560,000
All clinical services

South Yorkshire (pop 2.2m)
- Cardiothoracic
- Vascular
- Bone
- Cancer

National including:
- Pulmonary Vascular Disease
- Ocular oncology
- Orthopaedics
- Gestational Trophoblastic Disease
- Spinal Injuries
- Infectious diseases
Providing safe, high quality care is our top priority and most of the time we achieve or exceed our patients’ 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.

We have highlighted some of the improvement areas and performance in this summary but you can read more detail about all the improvement areas in the Quality Report.

The Quality Report is available on the Sheffield Teaching Hospitals NHS Foundation Trust website www.sth.nhs.uk or by calling 0114 2714322.

OUR PRIORITIES 2017-18

Every year we set priorities for improvement which are monitored and compared to how we performed in that area in the previous year. Here is a progress update on the improvement priorities identified for 2017-18:

To further improve the safety and quality of care provided to our patients through initiatives such as the Patient Safety Zone and Safety Huddles.

Safety huddles are short multidisciplinary briefings designed to give staff opportunities to understand what is going on with each patient and anticipate future risks to improve patient safety and care.

In addition to the 40% of inpatient areas that have introduced Safety Huddles, there has been interest from other areas such as Radiology, Charles Clifford Dental Hospital and Portering Services.

Many teams have achieved a stepped reduction in the number of falls since introducing Safety Huddles, and their patients have longer periods of time between new pressure ulcers.

To further improve End of Life Care

Clinical leads are now leading on the roll out of the implementation plan for the Trust’s new End of Life Care Strategy.

An electronic core nursing care plan continues to be rolled out across the Trust. The plan includes recording of preferred place of care and death.

A new ‘Individualised Care Plan for the last days of life’ has also been developed and approved. This is currently being piloted on three wards and will then be rolled out across the Trust once an evaluation has taken place.

A new End of Life Care intranet page has been developed. This will act as a central hub for staff to access all relevant End of Life Care information.

A survey to seek feedback from bereaved family and carers in relation to the care of their loved one during the last days and hours of their life has also been undertaken. The results and themes will be used as a baseline against which we can compare the results of future surveys to identify if improvements have been made.

Introduce Electronic Care Planning across the Trust to improve the quality of care planning.

An electronic version of care planning has been built into the Trust electronic patient record, and piloted on three wards. The aim is to further improve individual care plans, sharing of information and interaction with patients/carers.

Electronic care planning is now being rolled out Trust wide. It has provided the opportunity for several specialities to review any existing care plans and bring them up to date with current requirements.

To improve how complaints are managed and learned from.

A number of quality initiatives have been implemented over the past 12 months, to further improve responsiveness to complaints.

The response time to complaints this year was 93%, achieving the target (85%) for the third consecutive year.

To improve staff engagement by using the tools and principles of Listening into Action (LiA).

LiA is a staff engagement initiative that we have been using for a few years to allow us to gather ideas and insights from staff at all levels into how we can make improvements within our organisation.
Staff ideas are then ‘brought to life’ by being developed into schemes to try out new ways of working. Since the launch there have been 85 schemes delivered by 52 teams.

Over the last year, we have seen a number of achievements and useful findings through LIA schemes, for example, our Front Door Response and Active Recovery (AR) teams have proven by a trial in A&E that the patient’s length of stay can be reduced by one night with AR support. As a result the team are looking for funding to secure this service on a permanent basis.

In July 2014 the Trust committed to a three year ‘Sign up to Safety’ campaign. The Trust’s overall aim was to further improve the reliability and responsiveness of care given to patients, which in turn aims to achieve a 50% reduction in harm.

The Trust has since introduced bespoke training packages providing staff with the skills to undertake simulation exercises and to improve the investigation of and learning from serious incidents.

Care bundles for Red Flag Sepsis and Acute Kidney Injury (AKI) have continued to be rolled out and developed throughout 2017-18 and a joint education package for newly qualified nurses has been developed which links the management of sepsis, AKI and the deteriorating patient into one teaching session. The sepsis tool has been implemented in all areas and 80 champions have been trained to undertake a ‘train the trainers’ role.

The Trust continues to maintain a reduction in the cardiac arrest rate. Audits following every cardiac arrest have provided the Trust with quality data, which is submitted to the National Cardiac Arrest Database.

To ensure every hospital inpatient knows the name of the consultant responsible for their care during their inpatient stay and the name of the nurse responsible for their care at that time.

In July 2015, the Trust introduced a mix of tent boards and wall mounted boards at patients’ bedsides which captures each patient’s named nurse and consultant.

Following an evaluation, education packs have been produced to support the project and circulated to educators through the Nurse Directors. These, along with posters, have been used to promote the use of the tent boards within their care groups.

To review mortality rates at the weekend and to focus improvement activity where necessary.
The Trust continued to review mortality by day of the week during 2017-18. Findings show that our Hospital Standardised Mortality Ratio for all admissions (and for non-elective admissions only) for each day of the week, including Saturdays and Sundays, is ‘as expected’ when compared to the national average.

To ensure, as a Trust, we learn from all deaths we have been implementing the National Quality Board guidance on Learning from Deaths during 2017-18.

**Cancelled Operations**

The number of operations having to be cancelled on the day of surgery has reduced in 2017-18. Indeed 300 less ‘avoidable’ cancellations happened due to a number of initiatives that have taken place during the year.

This included:

- An expansion of reminder calls for patients at four days prior to surgery to ensure they are fit, ready, willing and able to attend as planned.
- Improved planning and scheduling processes to ensure appropriate equipment and staffing can be planned well in advance to reduce potential on day problems.
- Development of a Standard Operating Procedure for elective scheduling, to enable better communication with patients and clinical teams, reducing the chances of list and patient cancellations.
- The launch of a policy for Management of On-Day Cancellations, which when followed, ensures all steps are taken to avoid an on day cancellation.
- Introduction of new guidelines for high blood pressure in Ophthalmology.

**Pressure Ulcer Prevention**

The overall proportion of pressure ulcers has increased slightly during 2017-18.

During 2017 the Trust Executive Group formally approved the integration of the acute and community Tissue Viability Teams. Both teams have worked collaboratively over the course of the year and have been proactive in implementing strategies to reduce the incidence of acquired pressure damage through a number of different initiatives.

Safety Huddles, led by clinicians and with a multidisciplinary focus, are supporting teams to identify those patients most at risk of developing a pressure ulcer and a plan for prevention.

The Tissue Viability Team also delivered bi-monthly study days for Health Care Assistants and Registered Nurses.
Asistants and Registered Nurses that focused on pressure ulcer prevention and management.

The Tissue Viability Team has worked with the technology team to develop electronic records for nursing staff relating to wound assessment and care planning for pressure ulcer prevention are also being developed.

**Optimise Length of Stay**

The Trust has been continuing to develop its arrangements to optimise patient flow and reduce length of stay.

Work during 2017-18 has included the development of the Sheffield SAFER Flow 10 principles based on national best practice and local learning from wards. The underlying principles of this work are informed by the NHS England guidance: Safer, Faster, Better: good practice in delivering urgent and emergency care. The aim is to ensure that all patients have a plan and they receive the care they need in a timely way.

The Trust is a partner in the Sheffield Delayed Transfer of Care Programme, aiming to enable more people to leave hospital immediately on the day that they no longer need hospital treatment and enable a greater proportion of people to be able to return safely to their own home. Routes out of hospital have been simplified to three main routes and four wards are involved in piloting these along with earlier discharge planning. A ward metrics dashboard has also been created to enable the impact of these changes to be assessed.

**KEEPING WAITING TIMES LOW**

We know that ensuring waiting times are kept as low as possible is important to our patients. The average waiting time for care at the Trust is eight weeks or less and the majority of cancer treatment waiting time standards are consistently met. During 2017/18 we achieved the majority of the national waiting time targets.

Whilst we did not consistently achieve the national 95% 4 hour wait time standard, on average we did treat, discharge or almost 9 out of 10 patients who came to the emergency department within the required 4 hour timeframe.
MEET SOME OF THE PATIENTS WE HAVE CARED FOR...

Baby joy after life changing MS treatment

Louise Willet, aged 36, from Dinnington, describes her incredible journey to motherhood:

“After suffering from an aggressive form of MS, I was offered a stem cell transplant at Sheffield Teaching Hospital NHS Foundation Trust, which meant my immune system would be rebooted to halt the disease using chemotherapy.

The MS team explained to me that while this treatment had the potential to drastically improve my quality of my life, it did pose a risk to fertility, and so I was given the option of IVF at the Trust’s assisted conception unit, Jessop Fertility.

We decided to go ahead and the team at Jessop Fertility froze and stored four of our embryos. We instantly felt comfortable in their care and knew they were concerned with making sure they were attending to our needs.

Once my stem cell treatment had completed we were overjoyed to discover it had worked and I was symptom free from my multiple sclerosis. However we also discovered that my fertility had indeed been damaged and so we nervously decided to proceed with embryo implantation.

Thankfully, our dreams came true in the form of our gorgeous little girl, Joy, who was born on 12th February 2018.

Finding out I was pregnant was the best feeling in the world.

The staff at Jessop Fertility really were excellent, they listened to our concerns at every stage and worked to help us feel reassured. I never once believed it would happen but it absolutely did so miracles can come true.”

Enhanced recovery programme enables patients to return home three days after major surgery

Jennifer Atkinson, 70, of Tickhill, South Yorkshire, underwent a radical cystectomy at the Royal Hallamshire Hospital in Sheffield, a 4 ½ hour long operation to remove her bladder and womb.

She was one of a group of patients who were able to return home just three days after the surgery as a result of enhanced post-operative recovery procedures at the hospital’s urology department.

She said: “I feel wonderful and I can’t fault the treatment I have had at any stage of the process. It really has been world class. I want to thank the NHS for saving my life.” Sheffield Teaching Hospitals is the largest centre in the UK for bladder cancer surgery.

Radical cystectomy is a complex procedure and a few years’ ago it was viewed as requiring an inpatient stay of up to two weeks, but multiple small technical improvements and changes in how patients are cared for mean that many patients are now able to go home within five days. In some cases as few as three.

Anaesthetic and critical care teams, stoma specialist nurses, theatre and recovery staff, urology nurses, junior doctors, physios and occupational therapists all work together before and after the operation to provide all the support patients need to enable them to return home as soon as possible.

In Jennifer’s case, the operation went so well that she has subsequently been able to return to modelling, which she does for a local dress shop, and been on a long-haul holiday to Thailand without difficulty.”
WORKING TO KEEP OUR PATIENTS SAFE

Rigorous infection prevention and control and clean facilities are fundamental to our care standards. We continue to work hard to minimise the chances of patients acquiring hospital acquired infections, such as Norovirus and MRSA. During 2017/18 we had no cases of MRSA bacteraemia and the number of cases of C.Difficile remained low.

During the winter months, flu can pose a real health risk for patients and so during 2017/18 we vaccinated the highest ever number of our staff (78%) so that we limited the risk of spreading the virus. We also offered patients who came in as emergencies with flu symptoms fast track testing which allowed them to be diagnosed in just 15 minutes. This helped us treat patients quickly and prevent the spread of the virus.

WHAT ARE OUR PRIORITIES FOR 2018/19?

Safety:
✓ Reduce inpatient falls by 10%.
✓ Develop a human factors plan to create tangible improvements in safety culture.
✓ Demonstrate a 30% improvement in the early recognition and management of sepsis
✓ Ensure a Trust wide reduction by 10% of all avoidable patient harm associated with pressure ulcer prevention and management.
✓ Implement an electronic system for tracking patients' observations.
✓ Reduce preventable Acute Kidney Injuries (AKIs) across the Trust (three year plan)

Patient Experience:
✓ Implement and evaluate at least one major coproduction project during the lifetime of the Quality strategy and develop a plan for embedding this approach more widely
✓ Ensure that End of Life Care continues to be individualised and meets the needs of both patients and those who are important to them
✓ Ensure out-patient and in-patient letters are clear and understandable, and meet the needs of both patients and national good practice guidelines
✓ Significantly increase the scale of patient engagement with those who may be harder to reach or seldom heard
✓ Increase the availability of high quality refreshment facilities in outpatients.

Effectiveness:
✓ Further improve the process and quality of consenting; with a focus on ensuring patients are provided with individualised information.
✓ Ensure that our Safety Checklist is further embedded into practice across the Trust; aiming to reduce errors and adverse events, and increase teamwork and communication
Overall 2017/18 was generally another very challenging financial year for the NHS.

The major financial aim for the Trust in 2017/18 was to maintain financial stability, while meeting the demands of increasing numbers of patients and more stringent operational targets.

Our total income last year was just over £1 billion and the majority of our costs are associated with paying the 17,000 staff who work for the Trust.

The Trust had a deficit of £8.4m (0.78% of turnover). However, there were exceptional items relating to impairment charges arising from the Estate Revaluation undertaken during the year and additional national Sustainability & Transformation Funding (STF). Without these items the deficit would have been £1.2m.

The efforts of all staff to achieve this should not be underestimated given the current climate and the fact that our Trust has already delivered significant efficiency savings over the past few years.

Neil Priestley
Director of Finance

Where our money comes from

Income: £1,077,062k
- Clinical Commissioning Groups and NHS England - Provision of Healthcare Research and Development: £877,651k
- Education and Training: £17,889k
- Local Authorities: £17,889k
- NHS Other Sustainability and Transformation Funding: £51,841k
- Received from NHS Charities and Other Bodies: £5,468k
- Other Income: £2,170k

How we spend our money

Expenditure: £1,085,423k
- Services from NHS Bodies: £17,889k
- Purchase of Healthcare - Non NHS: £21,719k
- Wages and Salaries: £633,427k
- Drug Costs: £148,262k
- Supplies and services - clinical: £101,930k
- Supplies and services - general: £8,206k
- Premises and Establishment Costs: £46,862k
- Depreciation & Amortisation and Impairment Charges: £45,947k
- Clinical Negligence: £10,700k
- Other Costs: £9,363k
- Financing Costs: £13,143k
- Research and Development: £27,975k

In total, over £35.9million has been spent improving our facilities and developing our services across the Trust during the year.

A key focus in 2017/18 was once again on investing in the Trust’s medical equipment and supporting physical infrastructure to support new and existing services.

Some of the major schemes undertaken were a new state of the art Eye Centre at the Northern General Hospital (see next page for more details) and the creation of new theatres at the Hallamshire Hospital.

A number of wards were refurbished at Weston Park along with the lifts at the Hallamshire Hospital, laboratories at Charles Clifford Dental Hospital and the radiology department at the Hallamshire Hospital.

A new Minor Operations Suite also opened at the Hallamshire Hospital and a fantastic new dementia friendly Frailty Unit at the Northern General.
A brand new state-of-the art £6.7m eye centre opened its doors to patients in June 2018.

The new purpose-built centre offers some of the best ophthalmic assessment and surgical facilities in the UK, and provides care for over 5,000 patients across the Sheffield and South Yorkshire region in spacious and accessible surroundings.

The light, airy facility – which has been designed with the needs of people with limited vision in mind – boasts ten consulting rooms, world-class diagnostic equipment, two hi-tech operating rooms, a large, welcoming reception area, dedicated drop off and pick up points outside the centre, and handy self check-ins enabling patients to notify staff of their arrival in a matter of seconds.

As a dedicated centre for cataract surgery, patients visiting for assessment and treatment of cataracts will benefit from a unique ‘one-stop approach’. This will mean that they will now be able to have their outpatient consultation, all diagnostic tests, pre-operative assessments and consent for surgery process completed in just one visit, saving unnecessary repeat trips prior to surgery.

If patients are fit for local anaesthetic cataract surgery they will be given a date for their operation before they leave. On the day of surgery, patients will be seen by the same consultant they saw at their outpatient appointment and a named nurse will stay with them to ‘hold their hand’ during surgery. Refreshments will also be provided to patients after surgery.

All patients returning for post-operative check-ups will be able to see their consultant if necessary and agree a date for surgery in their other eye if this is needed.

Dalip Malkani, 78, of Bradway, was one of the first patients in the region to benefit.

“My vision is much improved in that eye and the overall quality of my vision is much better than before,” said the IT consultant who first started to get a cloudiness in his vision a year ago and was diagnosed with a cataract in his right eye.

“The staff have been marvellous, they’ve taken really good care of me and kept me informed throughout, and I can see things much more clearly now. My TV looks like it has much higher resolution than it did before. I am very fortunate to be in Sheffield and have world renowned eye specialists.”
EMPLOYING CARING AND CARED FOR STAFF

The Trust is privileged to have many skilled and dedicated staff who contribute to the success of our hospital and community services.

That is why ‘employing caring and cared for staff’ is one of the key aims and objectives in our Corporate Strategy ‘Making a Difference’. We also aim to be seen as an ‘employer of choice’.

Our staff’s dedication and commitment is a source of great strength for the Trust. It was therefore pleasing that the results of the 2017 NHS staff survey showed that 83% of our staff would recommend the Trust to family and friends for treatment. This is well above the NHS average for combined acute and community trusts of 68%. Additionally 67% of our staff would recommend the Trust as a place to work, this again is above the NHS average for combined acute and community trusts of 59%.

We also have a robust Health and Wellbeing programme which includes health checks for all staff over the age of 40 and free flu vaccination for staff. We also provide fast track access to physiotherapy, psychology and counselling services and stress management support such as a free mindfulness smart phone app.

Over the last 12 months more than 8,000 colleagues from across the Trust have given their views and ideas on what would make Sheffield Teaching Hospitals NHS Foundation Trust a brilliant place to work.

All of this information has been used to inform our new People Strategy which is called “Making it Personal”. The strategy sets out how we want to build on our strong foundations to develop and support everyone who already works at the Trust and also to make it an organisation which attracts the very best people to work with us. The people strategy fits with our PROUD values, Making a Difference corporate strategy and our aims.

OUR VALUES ARE WHAT MAKE US DIFFERENT

P - Patient-first
Ensure that the people we serve are at the heart of all we do

R - Respectful
Be kind, respectful to everyone and value diversity

O - Ownership
Celebrate our successes, learn continuously and ensure we improve

U - Unity
Work in partnership and value the roles of others

D - Deliver
Be efficient, effective and accountable for our actions
The future shape of the NHS will see more integration and partnership working across organisations.

This has been a feature at Sheffield Teaching Hospitals NHS Foundation Trust for some years as exemplified by the integration of community services within our organisation and the stronger interface with GPs and social care colleagues across the city.

For example the Trust hosts the Yorkshire and Humber Genomics Medicine Centre which has recruited over 3,000 people to date as part of the UK 100,000 Genome project.

Our clinicians have joined forces with technology companies and researchers to test how new technologies can better support patients with long term conditions to manage their health and avoid a crisis which may see them admitted to hospital. This work is being coordinated through the Perfect Patient Test Bed hosted by Sheffield Teaching Hospitals - one of only 7 NHS Innovation Testbeds nationally.

A new direction of travel for the NHS nationally has also enabled us to further strengthen our partnerships with other healthcare organisations in Sheffield, South Yorkshire and further afield. This has followed an announcement in 2017 by Health Secretary Jeremy Hunt that ‘Integrated Care Systems’ would be established. The idea behind these new partnerships of NHS commissioners and providers of healthcare is for them to work together across a wider geographical footprint with a common set of goals and vision which supports the planning and delivery of sustainable services now and in the future. We are a partner in the South Yorkshire and Bassetlaw Integrated Care System and our Chief Executive Sir Andrew Cash is also the lead for the ICS. As well as this, we also saw the creation of the Sheffield Accountable Care Partnership in 2017 which brings together health and social care organisations in the City to jointly plan and deliver services tailored to the needs of the Sheffield population.

A national survey of hospital inpatients carried out in 2017 by the Care Quality Commission has found that patients cared for by Sheffield Teaching Hospitals are pleased with the care they receive and in many areas the care was rated as ‘better than the national average’. Survey highlights included 96% of patients stating that they had been given enough privacy when being examined or treated and 97% saying they were kept well hydrated, having had enough to drink whilst in hospital.

We recognise the importance of positive staff engagement and good leadership to ensure good quality patient care.

During the last 12 months we have continued to encourage more of our staff to be actively engaged and involved in developing services and driving innovations in both clinical and non clinical services.

Yet again during the popular ‘Give it a Go’ weeks many members of staff tried out new ideas or ways of doing things which made a difference to patients or staff.
Patients praise hospital care

In many areas the care was rated as better than the national average, for example the amount of information that was provided about a condition or treatment, receiving answers that were easy to understand, discussion of further care needs and support being put in place outside of hospital.

Tim Buxton, 60, an inpatient on ward Firth 9 at the Northern General Hospital, said: "I have stayed as an inpatient eight times following various procedures including emergency life-saving surgery and every stay has been excellent. The staff are really caring and efficient. I have been kept really well informed. I ask a lot of questions and the doctors and nurses always explain things to me in a way I understand. I also appreciate that I see the same consultant four times a week, the consistency is really good. I can’t thank them all enough.”

A national survey of hospital inpatients carried out by the Care Quality Commission has found that patients at Sheffield’s hospitals are pleased with the care they receive.

The Trust will use the feedback to highlight high-performing areas and to identify where there is room for improvement. The survey gave the Trust lower scores when it came to ‘asking for patients’ views and providing information about how to complain.’

Dame Hilary Chapman, Chief Nurse at Sheffield Teaching Hospital NHS Foundation Trust, said: “We are really pleased the survey showed better than average scores in a number of areas of patient care.

“Since the last survey we have continued to make further improvements in areas that patients tell us matter to them most, and we will use the feedback from this survey to make even more improvements for our patients over the coming year.”

Support your local hospitals

As a member you can play a role in the Trust and get more involved in your local hospitals.

To become a public member, you must live in Sheffield and the surrounding area. To become a patient member you must have been a patient in the last five years.

Trust members can:
• participate in the election of Governors
• have the opportunity to stand for election to the Council of Governors
• provide feedback and opinion about services and possible developments
• receive information about the Trust on a regular basis
• attend special functions which may include open days, tours and seminars

Members will not receive any preferential access to actual health services, as this would be contrary to the principles of the NHS.

The security of your personal information is very important to the Trust. You can see more information about the General Data Protection Regulations at www.sth.nhs.uk/about-us/general-data-protection-regulations.

CQC inspection

As reported in the previous edition of Good Health, the Trust was inspected by the Care Quality Commission (CQC) during June and July.

Inspectors visited all our sites in June and returned to conduct interviews with senior members of staff in July.

Initial feedback has been positive and inspectors were shown many of the improvements which have been made since the previous inspection in 2015.

Following the inspection, the Trust will now be rated against five key domains:
• Safe
• Caring
• Effective
• Responsive
• Well led

The final report and rating is expected in September. We will keep you updated on the outcome.
Governors visit the Charles Clifford Dental Hospital

I’m the kind of patient who goes to the dentist every twenty years whether I need to or not. So as you can imagine, when the opportunity came up for a group of hospital governors to have a look around the Charles Clifford Dental Hospital I had mixed feelings.

The Charles Clifford is tucked away at the back of the Hallamshire, on the other side of the road from Jessops, and contrary to my expectations isn't a bit scary. There is a lot of building work going on as parts of the building are being refurbished but you can certainly see the results in the bright, clean (and, again, not at all scary) areas that have already been redesigned. My first impression was of a place full of busy purposeful activity - and student dentists. If you aren’t currently being treated by a dentist, and you have time to fit your appointment in with students’ schedules, you can put your name down at www.sth.nhs.uk/our-hospitals/charles-clifford-dental-hospital to be considered for treatment by supervised trainees and of course, as dental nursing and postgraduate dental students.

There’s a mutually beneficial relationship as the hospital can provide dental services by supervised trainees and of course the city and surrounding area can provide the students with every kind of dental issue they’re likely to be faced. There are also extensive laboratories where they manufacture prosthetics like dentures and orthodontic devices like braces and we were able to meet some of the technicians and see the work. There were provisions for 3-d printing and we talked to them about how they saw the future: in five years time would they all be able to press a button and have the device simply slide out of the printer? There’s some time to go yet before we are all living in the future but watch this space.

As for me, well, I have been reading up on the services the NHS can offer to nervous patients and, after visiting the Charles Clifford, I’m sure it won’t be twenty years before I make it through their doors again.

Wendy Bradley
Public Governor

Innovative neck collar for motor neurone disease patients

A revolutionary neck collar designed to ease pain and make everyday tasks such as eating and communicating much easier for patients living with motor neurone disease (MND) is now available to healthcare professionals and individuals across the world.

The Head Up collar, which was funded by the National Institute for Health Research’s (NIHR) Invention for Innovation (i4i) programme and the Motor Neurone Association, is the first of its kind and has been brought to market as a result of an innovative five-year project between the NIHR Devices for Dignity (D4D) MedTech Co-operative, which is hosted by Sheffield Teaching Hospitals, Sheffield Hallam University and the University of Sheffield.

Patients with MND helped to design the unique collar which offers personalised support to the collection of small muscles in the neck which are particularly vulnerable to the wasting effects of the debilitating disease.

BBC news featured a piece on the new neck collar, and spoke with 72 year old Philip Brindle, who said: “The quality of my life has been substantially different as a result of this collar, there's no doubt about that.”
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I believe that quality care is a right that all patients should expect from their local hospitals. I am keen to dedicate my time and energy supporting the Trust in working towards excellence in health care.

As well as a passion for the NHS I also chair the Sheffield Environmental Movement, a charity which works to facilitate people from Black, Asian, Minority Ethnic, Refugee (BAMER) communities to access the natural environment to help promote their health and wellbeing.

Originally from Singapore, I qualified as a State Registered Nurse with the General Nursing Council in the UK in 1964. I then retrained as a physiotherapist, later becoming a lecturer in physiotherapy at the School of Physiotherapy in Sheffield (now part of Sheffield Hallam University). My interest in helping patients to cope with pain led me to train in traditional acupuncture medicine and until retirement in 2015 I had my own private practice for 25 years in Sheffield.

I am the primary carer for my son who suffers from what is known as Dravet’s Syndrome (epilepsy, autism & severe learning difficulty), regrettably, due to the curvature in his spine (scoliosis) he is prone to chest infections and has been admitted intermittently to hospital. My medical background and caring for my son have made me very conscious of the importance of patient-led care in hospital. My philosophy, as a clinician and an educationalist, is to know your patients through not only listening but hearing what they say to you.

I am excited to be a Patient Governor so that I can contribute towards the needs and interests of patients especially when they are in hospital.

Joe Saverimoutou
Public Governor
South West Sheffield

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I am passionate about good patient care and consider it an honour to be able to continue to represent Trust Members in South East Sheffield as a Governor and continue the work I am involved in within the Trust as I feel our Hospitals in Sheffield are amongst the finest in the land.

I sit on various committees within the Trust amongst which is the Organ Donation Committee, whilst respecting other’s views on organ donation I feel strongly that too many people die with their organs intact that could give life and hope to others.

I am also an active participant in Patient-led Assessments of the Care Environment (PLACE), a national scheme where patients are at the centre of inspections of hospital environments; cleanliness; patients’ privacy and dignity and also food and hydration.

I am delighted to be continuing in the role of Public Governor for members in the South East of Sheffield for a further term of three years. Over the past three-year term I have attended many meetings on the activities of the many departments within the Trust. I have found these meetings to be very interesting and informative giving me a much better understanding of the workings of the Trust. This understanding and involvement enables me to communicate and contribute more fully when addressing the issues within the Trust.

It is my aim over the next three-year term to continue with these activities and represent the Trust members to the best of my ability.

I am very pleased to be able to continue in the role of Patient Governor for my final term of office.

Since first being elected, I have been involved in numerous committees and projects, focussing on quality of care and patient safety and have recently joined the Infection Prevention and Control Committee as a voice for patients. These are areas I am particularly interested in and I am delighted I now have the opportunity to continue with these developments.

The Sheffield Teaching Hospitals Trust faces some challenging times ahead and it is my intention to continue being the patient voice to ensure that care remains safe, efficient and effective at all times.

Joyce Justice
Public Governor
South East Sheffield

Kath Parker
Patient Governor

Ian Merriman
Public Governor
South East Sheffield

Lewis Noble
Public Governor
West Sheffield

I am pleased to have the chance to serve a further 3 years as Public Governor for Sheffield West. The NHS and partner organisations face unprecedented pressures in a variety of ways, and it is more important than ever that the voice of the wider community is heard.

One of my particular concerns during my first 3 year term was the processes for dealing with Delayed Transfers of Care (for example, when hospital care, treatment and therapy have been completed, but arrangements to support them at home are not yet in place). I will continue keep a close interest in this, and other matters related to the welfare of our patients and their families.
12 September, 10:00 am  
Annual Members’ Meeting  
Medical Education Centre  
Northern General Hospital

25 September, 10:00 am  
Board of Directors  
Undergraduate Common Room  
Medical Education Centre  
Northern General Hospital

25 September, 12:30 pm  
Council of Governors’ Meeting  
Undergraduate Common Room  
Medical Education Centre  
Northern General Hospital

30 October, 10:00 am  
Board of Directors  
Seminar Room 1, R Floor  
Royal Hallamshire Hospital

27 November, 10:00 am  
Board of Directors  
Seminar Room 1, R Floor  
Royal Hallamshire Hospital

18 December, 10:00 am  
Board of Directors  
Undergraduate Common Room  
Medical Education Centre  
Northern General Hospital

18 December, 2:30 pm  
Council of Governors’ Meeting  
Undergraduate Common Room  
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Agendas, associated papers and meetings times are uploaded onto the Trust website seven days prior to each meeting.

Council of Governors meetings  
www.sth.nhs.uk/members/governors-council/governorscouncil-meetings

Board of Directors meetings  
www.sth.nhs.uk/about-us/board-of-directors-meetings

The earliest image dates from 1902, and shows nurses and babies on a maternity ward.

Other images show student nurses in a classroom at City General Hospital in 1937, a Nightingale ward from 1952, nurses’ dance and pantomime from the 1950s and a group of newly qualified nurses from the 1980s.