

## Executive Summary

### Report to the Board of Directors

Being Held on 31 January 2023

<b>Subject</b>	Board of Directors' Out and About Visits
<b>Supporting TEG Member</b>	Sandi Carman, Assistant Chief Executive
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<b>Status</b>	Note

### PURPOSE OF THE REPORT

To provide a summary update on the visits that have taken place, by members of the Board during December 2022 and January 2023.

### KEY POINTS

The following visits have taken place since the last Board of Directors' meeting:

- Human Resources: Occupational Health and Learning & Development (Northern General Hospital) by Ros Roughton, Kirsten Major and Michelle Cook on 22 November 2022
- Facilities: Catering and Reception (Northern General Hospital) by Annette Laban and Mark Gwilliam on 28 November 2022
- Medical Training/Education (Northern General Hospital) by Shiella Wright, Sandi Carman and Steve Bell on 1 December 2022
- Strategy and Planning (Northern General Hospital) by Annette Laban, Chris Morley and Ian Merriman on 1 December 2022
- Facilities: Linen Services (Northern General Hospital) by Maggie Porteous and Neil Priestley on 8 December 2022
- Clinical Operations: Patient Booking Hub (Royal Hallamshire Hospital) by Chris Newman, Mark Tuckett and Jim Steinke on 4 January 2023
- CEO Office: CEO Team and Patient Information Team (Beech Hill Road) by John O'Kane, David Black and Michelle Cook on 6 January 2023

As previously noted, from October 2022 to April 2023 our Out and About visits will primarily focus on Corporate/non-clinical areas.

Each visit has been hosted by colleagues in the respective area, Board members and Governors would like to extend their thanks to the individuals involved and the courtesy shown during the visits.

### IMPLICATIONS

AIM OF THE STHFT CORPORATE STRATEGY		TICK AS APPROPRIATE
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	
5	Create a Sustainable Organisation	
6	Deliver Excellent Research, Education and Innovation	

## RECOMMENDATIONS

The Trust Board of Directors is asked to note the contents of the update on the Out and About visits that have taken place in December 2022 and January 2023.

In November 2021, the Trust launched a scheduled programme of out and about visits for Board members to visit all Directorates, pairing both a Non-Executive and Executive Director. Further to reinstating the programme of visits in March 2022, it was agreed to invite Council of Governors' members to join future visits.

The scheduled programme for Clinical areas has been completed and a programme of visits to Corporate areas commenced in September 2022.

During December 2022 and January 2023, the following visits took place and key points to note are as follows:

**Human Resources: Occupational Health and Learning & Development, Northern General Hospital [Ros Roughton, Kirsten Major and Michelle Cook]**

The visit was split into the two distinct components of Occupational Health (OH) and Learning & Development.

- There was an issue of signage to OH where one set of signs direct you to the physiotherapy out-patients department and this was flagged to the team. The team talked through in particular their experience of Covid and how much they had been part of the organisational response in terms of the impact of Covid on staff. This had included the roll out of the QRISK3 programme to identify staff in the early months of the pandemic who may be at particular risk of developing serious complications should they contract Covid-19. They had clearly completely changed their approach and interventions on several occasions to keep up with the pandemic. The team also described the extensive obligations they have to organisations beyond STH, such as the Universities, to whom they also provide a service and the complex arrangements for health screening amongst clinical staff.
- They shared an ambition to be more joined up with the staff physiotherapy service where they believe they could provide complementary input regarding, for example, adjustments to workplaces or whether there was a particular 'hotspot' in the organisation for musculo-skeletal problems that may merit a more holistic, workplace-based approach.
- The Learning and Development service had a range of training activities underway and we were able to observe both a Human Factors course and the preparatory course for people becoming Clinical Support Workers. It was particularly impressive to see in the latter the focus on softer skills with patients around communication and understanding and the tactics people could deploy to understand people's needs and wishes more clearly.

**Facilities: Catering and Reception, Northern General Hospital [Annette Laban and Mark Gwilliam]**

- Followed the production process from delivery of raw goods and ingredients through to cooked meals/chill and distribution.
- The department was extremely clean throughout meeting excellent hygiene standards.
- The day of the visit the unit wasn't very busy and had been impacted by staff shortages through sickness and high levels of covid absence. This being so, several staff had been transferred to provide support from dining rooms. We still had the opportunity to meet and talk with CPU colleagues in all sections. It was evident that colleagues are extremely engaged and committed to delivering an excellent catering service to both patients and STH colleagues.
- All colleagues working in the area appeared to be in excellent spirits and told us that they enjoy working in the CPU, however, it was noted that some colleagues struggle with the cold environment and working conditions.
- We were informed that the CPU produced in excess of 40,000 meals per week over a 5-day production cycle, however, the CPU has the capacity to double this throughput.
- Annette requested that Andrew met with Julie Phelan to consider communication and promotion of the CPU and catering facilities highlighting that all our meals are produced with locally sourced produce.
- Jeff explained there is a national shortage of food trays due to Brexit as they are supplied from Europe. He explained that at one point this year they only had two days of stock remaining and was extremely concerned that supply would run out and not be able to produce meals for patients. Annette asked Jeff and Andrew to have this recorded as risk on their risk register and have plans to mitigate the potential of not providing meals to the wards on trays.

## **Medical Training / Education, Medical Education Centre, Northern General Hospital [Shiella Wright, Sandi Carman and Steve Bell]**

- We learnt about the teams work with Doctors in training, recognising it took approximately nine years for individuals to obtain a consultant post. There are 25 medical specialty schools in Sheffield and from an administration perspective this means the team are liaising with 310 students on an annual basis. There is the ongoing challenge of managing placement numbers for medical students and this has required innovative work by the team who worked closely with the students and helped them to navigate through the course providing both pastoral and practical support.
- The team had recently undertaken a time out and created a plan on a page to help raise the profile of medical education at STH and ultimately supporting the trust in its strategic priority to deliver excellent research education and innovation.
- We noted the training levy was shared across services and distributed per trainee but recognised that the training burden can remain with limited individuals.
- Rosie Lockwood provided an overview regarding the Physicians' Associates cohort of professions which we have 20 distributed across areas such as Haematology, Oncology, Respiratory and Gastro. We also discussed the career escalator routes of moving into Physicians' Associate positions. Over all this was an excellent visit with a very dedicated and informed group of individuals who were adept at supporting the organisation, clearly recognising the dynamic between providing learning and development to a group of trainees and to deliver the operational requirements of the organisation.
- Finally, we visited the simulation suite where trainees gain experience in practical aspects of their course creating real life scenarios using the manikins. We recognised this was an essential part of training.

## **Strategy and Planning, Northern General Hospital [Annette Laban, Chris Morley and Ian Merriman]**

- We had a series of round table conversations with:
  - the Corporate Cancer Team represented by David Griffin-Mead
  - the Contracts team represented by Caroline Mabbott, Sarah Clarke and Jo Hancock
  - the Strategy and Planning Team represented by Paulette Affleck-Anderson and Mark Ellison
  - Mark Tuckett, as Director of Strategy and Planning was present throughout

### Corporate Cancer Team

- Small team of four staff, although small expansion imminent including developing an Assistant COO for Cancer
- Functions are largely supportive such as administration and reporting
- High degree of complexity due to the 'rules' regarding reporting cancer and they are the Trust experts on interpreting these 'rules'
- Work closely with the Cancer Alliance

### Contracts Team

- Have the corporate responsibility with the commissioners
- Lots of partnership working and relationship management
- Responsible for contracts with a 'clinical' twist.
- Leading on contracts with the Independent Sector on behalf of South Yorkshire and Bassetlaw (SYB)
- New types of contacts – Insourcing
- Innovative solutions such as
  - Cardiac Echo contracting
  - Ultrasound scanning at the Olympic Legacy Park

### Strategy and Planning

- Responsible for arranging and overseeing business planning and directorate reviews, capital planning, business development and sustainability
- Have led the vaccine programme over the last two years (Trust and South Yorkshire)

- Sustainability
  - Developed and refined the Green Plan
  - Delivery plan in place
  - Estates looking at solar panels and Electric Vehicle Charging points
  - Biodiversity Action Plan
  - Travel and Transport and Active Travel
  - Green pathways
  - Cycle and walking route around the NGH site

We would be keen to highlight

- The work of the STH contracts team managing and leading the Independent Sector Provider contracts on behalf of SYB, this is an area where they can do more across the SYB system.
- Innovative new ways of working which need considering from a contracting perspective – such as Insourcing.
- Sustainability, there is clearly good work happening, but it has a limited profile across the Trust.

### **Facilities: Linen Services, Northern General Hospital [Maggie Porteous and Neil Priestley]**

- Warm welcome from Reg Ramsden, Linen Services Manager. Interesting and informative discussion on the strategic position of Linen Services in the NHS, operational issues, etc. followed by a tour of the Laundry to witness the flow of items through the various processes.
- The Laundry is a busy operational facility with a considerable amount of equipment and over 70 staff. However, it appeared well organised and productive. Little opportunity to speak to staff.
- The STH Laundry is one of only 16 in England provided still by NHS organisations. Around 90% of linen services in England are provided by two private companies, Elis (around 70%) and Synergy, which has a facility in Sheffield, (around 20%). This raises some business continuity concerns and there appear to be some plans to build new NHS Laundries in the coming years. Apparently in Scotland and Wales all linen services are provided in-house.
- The STH Laundry processes 150,000 to 160,000 items per week. This includes services for Sheffield Children's and South West Yorkshire Partnership NHS Foundation Trust. Reg/Andrew believe that it would be possible to do another 100,000 per week but this would require additional space, staff, logistics, etc. Prices were felt to be comparable to the private sector.
- Key operational issues relate to energy prices, staffing, equipment, logistics, maintenance support and access to textiles.
- Most of the staff are AfC 2. Vacancies seemed relatively low currently, but it is challenging to recruit Supervisors at AfC 3 given the marginal salary differential.
- Capital investment in equipment has been significant in recent years.
- Securing linen is proving a challenge given issues in the "Cotton Belt", logistics, exchange rate fluctuations, etc. Orders have to be placed well in advance.
- Andrew and Reg were very proud of the support that they had given to the Trust through the Covid pandemic and had avoided any supply issues.
- The team are trialling reusable gowns/hats with the expectation of financial and sustainability gains. There will be a need for Autoclaves in some areas if this is to be fully rolled out.
- The team also identified challenges with curtains and felt that standardisation of designs across the Trust would be a good development.
- There would be an opportunity to provide services to at least some other local Trusts.

This is clearly a critical service and, like all of the corporate departments, needs to be recognised and supported. At the moment it appears well led and in a reasonably strong position. However, it will continue to need investment and staffing can always be a challenge. There is also a need to continue to benchmark prices and quality of service to ensure that we remain competitive with other providers.

### **Clinical Operations: Patient Booking Hub, Royal Hallamshire Hospital [Chris Newman, Mark Tuckett and Jim Steinke]**

- The location was a bit hard to find without great external signage, though that may have been operator error and is obviously not an area that patients actually attend physically!

- Atmosphere felt really positive, it was busy but calm. Lots of metrics on display on screens relating to call waiting times; numbers of calls that day.
- Very positive – none of us were surprised by the professionalism of the team, but all struck by the positivity and enthusiasm.
- Really enjoyed the opportunity to listen into some calls and to get a much better sense of the day-to-day work of the team. Also, good to spend time with the team's leadership discussing how they have worked over the pandemic, and the career development opportunities and pathways within the Trust.
- Clear opportunity to be substantially involved in development and deployment of the Oracle Cerner EPR – there is a huge amount of experience in the team to help us be more efficient and effective as an organisation.
- No issues to escalate – overall a really positive and welcoming visit.

**CEO Office: CEO Team and Patient Information Team, 8 Beech Hill Road [John O’Kane, David Black and Michelle Cook]**

- Very welcoming and open in style. Easy to find as on the corridor where I work.

Patient Information Service

- A lot of patient facing resources
- Moving to automated process for triggering updates
- Online and in paper format. Also, video format
- Central resources limited and diminishing as non-recurrent funding ceases
- Scope to enhance utility of resources to provide clearer and better advice and support to patients

Chief Executive’s Office

- Resourcing / staffing to service a lot of meetings and the associated work arising
- Important to ensure robust corporate governance.
- Wide range of work that encompasses governor support etc

Overall, a very interesting oversight of corporate governance and corporate management and patient information. All staff very professional and open to questions and challenge. Clearly a thoughtful team, with ongoing ideas on improving how and what they do.

Sandi Carman  
Assistant Chief Executive  
31 January 2023