

Executive Summary
Report to the Board of Directors
Being Held on 27 September 2022

Subject	Oversight Framework Update
Supporting TEG Member	Sandi Carman, Assistant Chief Executive
Author	Sandi Carman, Assistant Chief Executive
Status	Note

PURPOSE OF THE REPORT

To provide the Board of Directors with an update on the regulatory intervention following the publication of the Care Quality Commission inspection report (April 2022) including a summary of key updates from the Board-to-Board meeting held with NHS England on 10 June 2022.

KEY POINTS

The [NHS Oversight Framework 2022/23](#) is the tool used by NHS England to support providers to give patients, safe, high quality and compassionate care within local health systems that are financially sustainable.

Following the publication of the Care Quality Commission Inspection report in April 2022, NHS England took the decision to initiate formal regulatory action in response. This was undertaken on the basis that there are reasonable grounds to suspect that the Trust is in breach of its provider licence. Following a Board-to-Board meeting held on 10 June 2022 the Trust was placed in segment three of the NHS Oversight Framework 2022/23. This enables bespoke mandated regional support to be established to support the Trust to make the necessary improvements.

A copy of the summary of the Board-to-Board meeting on 10 June 2022 is attached.

At the time of writing the Trust is awaiting a copy of the anticipated enforcement undertakings (actions which the Trust will commit itself to taking). Once received the undertakings will be considered by the Trust and in accordance with the powers reserved to the Board of Directors a final copy of the undertakings will be presented to the Board for approval.

Close partnership working between the Trust and NHS England has enabled good progress in defining the appropriate level of bespoke mandated support. Once finally agreed this will also be reported to the next Board meeting.

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 Board of Directors is asked to receive the summary of the key updates from the Board-to-Board meeting on 10 June 2022 and note that further updates will be provided in relation to the mandated support arrangements and the enforcement undertakings.

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Annette Laban
Chair

Kirsten Major
Chief Executive

Sheffield Teaching Hospitals NHS Foundation Trust

6 September 2022

Dear Annette and Kirsten

Re: Summary of key updates from Board to Board meeting 10 June 2022

Firstly, I wanted to thank you and your Board members for attending the meeting, the comprehensive presentation you and your team provided and the wider engagement in the actions required in response to the issues which brought us together. The engagement of the wider Board, in particular, is an important indicator of the seriousness you have attributed to your response to the issues brought to our collective attention by the Care Quality Commission (CQC).

It is important to be transparent that the findings from the CQC inspection reports led NHS England (NHSE) to take the decision to initiate formal regulatory action in response. This has included an assessment that there are reasonable grounds to suspect that the Trust is in breach of the provider licence and the subsequent requirement for enforcement undertakings to be put in place to set out the actions required by the Trust in response to this. It was agreed the Trust would be placed in segment three of the NHS Oversight Framework 2022/23 with mandated regional support established to provide the requisite level of support required for the Trust to make the necessary improvements.

In conjunction with the regulatory actions, there is the need to focus on the actions at an organisational, system and wider level, where necessary, to respond effectively to the issues in focus as we discussed.

At the meeting you and your team provided a comprehensive update in relation to the issues and factors at play with regard to the CQC findings. It was a real positive that you clearly demonstrated how effectively the Trust Board are working together in response.

In your presentation you said that you had welcomed the opportunity for the Board to Board discussion and the preparations for the meeting had provided a good opportunity to fully digest and reflect on the findings of the CQC report. It had also allowed the Trust to consider the support that was thought to be needed in response. Again, you stressed full Trust Board ownership of this recovery journey, recognising this will be key to ensuring sustainable improvements that have full regard for the wider professional leadership domains.

An update on the key headlines from the CQC inspection report published on 5 April 2022 was provided. The key headlines included:

- An overall rating of Requires Improvement, from a previous Good
- 85 'must do' actions and 26 'should do' actions
- S29a Warning Notice requiring significant improvements by 17 July 2022
- Expecting a follow up inspection by CQC within three months

Within the inspection report and findings more generally is a focus on maternity services in the Trust. The update from the Trust is that there had been a focus within the maternity team on responding to ongoing operational pressures with insufficient capacity for a structured approach to the maternity improvements required.

In response to the specific issues in maternity services is a very detailed set of actions and outcomes that are guiding the improvement priorities. Central to this will be the quality of leadership in this service with appointment to key positions being a high priority for the Trust.

We acknowledged that there has been some positive feedback that improvements are being progressed in Maternity Services from the current support provided by the NHSE Maternity Services Safety Programme. It was recommended that a stocktake of improvement progress be undertaken to provide further assurance on progress in October 2022.

Other key areas discussed within the maternity update was the business case for the new EPR system for this service. There was a general consensus of the need to progress this at pace given the underlying and sustainable improvements this will enable whilst also acknowledging the need for urgent improvements to maternity services ahead of the new IT system being in place. This stimulated a discussion about considering the options and collectively ensuring the risks to the quality of wider services identified by CQC have been addressed.

We also discussed the wider focus on maternity services in the NHS and the need for all providers to take account of the Ockenden report and the related findings from this. Within this we discussed a number of potential handling risks in this area, and you provided a robust overview of the actions you are taking including managing relationships with key local stakeholders including MPs.

The importance of establishing an effective improvement culture was discussed. This organisational self-awareness of such issues is a key starting position for agreeing and implementing the actions in response and we look forward to hearing how this area of improvement progresses.

You proactively brought to our attention the issues raised by CQC in relation to mental health provision and the actions being taken in response to these. These included actions to ensure staff are competent in assessing mental capacity and the lawful deprivation of patient's liberty as well as being assured that the Trust appropriately restrain and tranquillise patients when required.

You further outlined the approach to safety huddles and explained your assessment that this is an area of practice that has not been structured in the way needed and is a priority for improvement. Within the meeting we discussed some resources that the Trust should consider for this including work led by the NHS Leadership Academy.

You emphasised that all clinical areas, including those not inspected, had taken on board the learning from CQC about the quality of care and all areas were responding to the need to improve. More generally there was a reference to other services and the need to ensure that no risks emerge in other areas of the Trust whilst there is likely to be a focus on responding to CQC.

We also used the meeting to discuss in detail the response to and support needed to address the issues identified by the CQC. Importantly, there was a collective understanding that whilst actions will be required that are explicitly within the control of the Trust, given the strategic importance of the Trust to the success of the South Yorkshire Integrated Care System there are also areas where there will need to be a system response to realise the required improvements. There will also be areas where support from NHSE will be required, the case for which will be strengthened given the regulatory action that has been required in response to the current challenges.

From the detailed discussion it was agreed that the support package would be developed between NHSE and the Trust further to the meeting taking into consideration the following points:

- There needs to be a clear narrative in the Trust and system specifying the priority areas for the Trust in response to the CQC findings, with a coherent improvement plan and support aligned to deliver at pace;
- A focus on the underlying organisational behaviours to ensure sustainable improvements are made; and
- Commitment from the Trust to look at learning and adopting good practice from other local providers.

The meeting concluded with you acknowledging the difficult period this had been for your organisation but a genuine belief that the organisation, led by the Trust Board, is now well placed to respond and recover from the issues identified by CQC.

Subsequent to the meeting I am aware of the work taking place to design the support package, agree the related exit criteria and regulatory details (enforcement undertakings) that will underpin the programme of work.

I look forward to working with you on your improvement journey and propose we arrange a follow-up meeting in the next six months to review progress and any additional support needs.

Yours sincerely



Richard Barker
Regional Director, North East and Yorkshire

Cc: Gavin Boyle, Chief Executive Officer, South Yorkshire Integrated Care Board
Margaret Kitching, Regional Chief Nurse, North East and Yorkshire, NHS England
Yvette Oade, Regional Medical Director, North East and Yorkshire, NHS England
Alison Knowles, Locality Director, South Yorkshire, NHS England