

Executive Summary
Report to the Board of Directors held in Public
Being Held on 24 September 2024

Subject	System and Partnerships Updates
Supporting TEG Member	Kirsten Major, Chief Executive
Compiled by	Claire Coles, Senior Business Manager
Status	Discuss and Note

PURPOSE OF THE REPORT

To provide an update on system partnership working arrangements within the Trust’s core partnerships.

KEY POINTS

Sheffield Health and Care Partnership

As a member of the Sheffield Health and Care Partnership (HCP), we collaborate with organisations across Sheffield to improve the delivery of services for our patients and the wider community in the City. A link to the papers from the recent Health and Care Partnership meeting held on 13 August 2024 can be found at the following link ([here](#)).

At the Board meeting on the 23 July 2024 it was agreed to report the number of patients who are medically fit for discharge but unable to be transferred to their relevant place of care. The average number of beds occupied by patients with no criteria to reside increased from 222 in July to 225 in August, this was 17.27% of all available general and assessment beds. Work continues to recover this figure back to the September trajectory of 193 by month end.

South Yorkshire and Bassetlaw Acute Federation

The Trust is one of five trusts which makes up the Acute Federation. We are committed to using our collective expertise and resources to ensure the people of South Yorkshire and Bassetlaw (SYB) have prompt access to excellent healthcare. The Acute Federation is led by the Trust Chairs and Chief Executives, alongside a range of professional partnership groups and is supported by a Managing Director and programme team. Further information on the partnership can be found following the link ([here](#)).

South Yorkshire and Bassetlaw Acute Federation System Delivery Group

We are involved in the System Delivery Group within the SYB Acute Federation. I attend this group which involves all partner Chief Executives and leads of the seven professional partnership groups for finance, nursing, medical, people and organisational development, operations, strategy and corporate governance, in addition to the Acute Federation Managing Director.

NHS South Yorkshire Integrated Care Board (SY ICB)

NHS South Yorkshire is the organisation that is responsible for developing a plan for meeting the health needs of the population in Sheffield. Papers and the video recording from the most recent South Yorkshire Integrated Care Board, held in Public on 4 September 2024 can be found at the following link ([here](#)). The ICB is part of the Integrated Care Partnership for South Yorkshire, which brings together a wide range of partners, not just the NHS, to develop the plan to address the broader health, public health, and social care needs of the population. The SY ICB Chief Executive report is included at Appendix A.

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 **NOTE** the updates from the Trust's core partnerships.

APPROVAL PROCESS

Meeting	Date	Approved Y/N
Board of Directors	24/09/2024	



Chief Executive Report
Integrated Care Board Meeting

4 September 2024

Author(s)	Gavin Boyle, SY ICB Chief Executive		
Sponsor Director	Gavin Boyle, SY ICB Chief Executive		
Purpose of Paper			
The purpose of the report is to provide an update from the Chief Executive on key matters to members of the Integrated Care Board.			
Key Issues / Points to Note			
Key issues to note are contained within the attached report from the Chief Executive.			
Is your report for Approval / Consideration / Noting			
To note			
Recommendations / Action Required			
The Board is asked to note the content of the report			
Board Assurance Framework			
This report provides assurance against the following corporate priorities on the Board Assurance Framework (<i>place <input checked="" type="checkbox"/> beside all that apply</i>):			
Priority 1 - Improving outcomes in population health and health care.	<input checked="" type="checkbox"/>	Priority 2 - Tackling inequalities in outcomes, experience, and access.	<input checked="" type="checkbox"/>
Priority 3 - Enhancing productivity and value for money.	<input checked="" type="checkbox"/>	Priority 4 - Helping the NHS to support broader social and economic development.	<input checked="" type="checkbox"/>
In addition, this report also provides evidence against the following corporate goals (<i>place <input checked="" type="checkbox"/> beside all that apply</i>):			

Goal 1 – Inspired Colleagues: To make our organisation a great place to work where everyone belongs and makes a difference	✓
Goal 2 – Integrated Care: To relentlessly tackle health inequalities and to support people to take charge of their own health and wellbeing.	✓
Goal 3 – Involved Communities: To work with our communities so their strengths, experiences and needs are at the heart of all decision making.	✓
Are there any potential Risk Implications? (including reputational, financial etc)?	
No	
Are there any Resource Implications (including Financial, Staffing etc)?	
No	
Are there any Procurement Implications?	
No	
Have you carried out an Equality Impact Assessment and is it attached?	
N/A	
Have you involved patients, carers and the public in the preparation of the report?	
N/A	
Appendices	
N/A	

Chief Executive Report
Integrated Care Board Meeting

4 September 2024

1. Purpose

This paper provides an update from the Chief Executive of NHS South Yorkshire on the work of the ICB and system partners for July and August 2024.

2. Integrated Care System Update

2.1 Our stance against racism

At the start of August, we saw some truly awful scenes of racism and violence across the country, including here in South Yorkshire. The scenes were shocking and appalling. We are grateful for the work of South Yorkshire Police for their response, and to all those health and care staff, including those at Yorkshire Ambulance Service, who worked during this time to treat those injured and to ensure our services continued unaffected.

The work of all partners and the response from the public was heart-warming. In addition, we echo the sentiments shared by elected Mayor and Police and Crime Commissioner Mayor Oliver Coppard, who is also the Chair of the Integrated Care Partnership, and who said everyone has a right to feel safe. The ICP has already committed to become an ant-racist health and care system.

NHS South Yorkshire has been supporting colleagues who have been affected directly or indirectly. We have been providing wellbeing support and this will continue for as long as it is needed.

Our thanks also go to colleagues across the health and care system who have helped support our EPRR response to these events. Colleagues have worked exceptionally hard to fulfil our Category 1 Responder responsibilities.

NHS South Yorkshire has committed to working through the North West Race Equality Framework. This sets out a systematic approach to becoming an anti-racist NHS organisation, with clear deliverables and external scrutiny of progress. We will ensure that the Board is kept updated with our practical progress on this.

In addition, we have recently helped to establish the South Yorkshire Race Equality Network for Primary Care staff. The Network is open to all staff working across Primary Care including General Practice, Optometry, Pharmacy and Dentistry and aims to provide a support to colleagues working in primary care with the challenges they face in this regard.

2.2 Intensive and Assertive Community Mental Health care

In late August we saw the publication of the CQC's Section 48 report into the treatment of Valdo Calocane by Nottinghamshire Healthcare NHS Foundation Trust. This followed the appalling murders of Barnaby Webber, Grace O'Malley-Kumar, and Ian Coates in June 2023. In response to the CQC's findings we are working across the South Yorkshire system to undertake a review of Intensive and Assertive Community Mental Health Care Services, which will conclude at the end of September. The outcome of the review will be presented to the Board at the earliest opportunity for review and discussion, which we expect to be the November meeting.

2.3 Integrated Care Partnership Board

The Integrated Care Partnership held a development session in July, which was an opportunity to discuss progress made in tackling some of key priorities to improve the health of our population and the challenges the health and care system faces. Underpinning the four 'bold ambitions' of our strategy are some specific and measurable aims and we took the opportunity to discuss the impact so far. The next ICP public meeting takes place in October 2024, and at that time we will give an update to our communities about the measurable progress we have made through the Integrated Care Strategy in the first year since its launch.

2.4 Financial Plan 2024/25

The financial plan for the South Yorkshire ICS, agreed with NHS England, is for a year end deficit no greater than £49m. To deliver this requires the Integrated Care Board to achieve a breakeven position, for the NHS Trusts to deliver a combined deficit not exceeding £49m and for the system collectively to deliver a further efficiency requirement of £48m.

NHS South Yorkshire was one of nine integrated care systems required to participate in the 'investigation and intervention' programme by NHS England following a greater than planned deficit at Month 2 (May). A further 11 systems have been identified as high risk at Month 3 (June). This reflects a challenging financial picture across the NHS with almost three quarters of the 42 Integrated Care Systems forecasting a deficit.

The investigation and intervention process will see NHS South Yorkshire colleagues work alongside NHS England and external consultants. It will build on work already initiated by system partners during planning for 2024/25.

The review will identify recommendations for a number of key interventions to be implemented across the system to reduce the expenditure run-rate, support the delivery of efficiency programmes and achieve the plan agreed with NHS England at the start of the year. These may include reviewing workforce models particularly the use of high-cost agency staff, non-pay spending controls, back-office functions,

estate and general productivity and efficiency improvements.

We will look to minimise the impact of this review on patient services. We will also work with our wider partners, particularly the local authorities to explore joint opportunities to improve services, reduce waste and deliver efficiencies. The ICB remains fully committed to addressing health inequality and supporting people to stay healthy and out of secondary care if safely avoidable. We believe this is not only better care but is less wasteful and a better use of NHS resources and will help us achieve financial sustainability.

2.5 Industrial Action

GPs have voted to take collective action for an indefinite period following a ballot of BMA GP partners/contractors, which was brought after an offer of a 2% pay growth earlier this year in the new GP contract. However, following the announcement of the independent Doctors and Dentists Pay Review Body last month the GP contract has now been uplifted by 6% to cover increased pay for salaried practice staff. Talks are ongoing between the government and the BMA to find a resolution.

The NHS is asking the public to still come forward as usual for care during collective action by GP services, which started on Thursday 1 August. Practices are still required to be open between 08:00 and 18:30 Monday to Friday. It is vital that patients still attend their appointments unless they are told otherwise, and practices should inform patients of any changes to services.

The nature of the action means that the impacts will vary at different GP practices and from area to area but could include GPs limiting the number of patient appointments per day. NHS teams are working hard to plan for any impact where possible to ensure services continue to be provided for patients.

The BMA have published a full list of their recommended collective action, which includes referrals, data sharing, medicines optimisation and taking part in pilot programmes. The full list can be accessed here: <https://www.bma.org.uk/GPcontract>

For Junior doctors the BMA have agreed a 22.3% pay offer, which will now be put to members to avoid further industrial action. The Government has accepted the pay review body's recommendations for a 5.5% increase for NHS staff on the standard Agenda for Change contract, and this is now subject to approval by the NHS Council.

2.6 Specialised commissioning

From April 2023, NHS England delegated responsibility for the commissioning of pharmacy, optometry and dental (POD) services to ICBs, including NHS South Yorkshire.

Since then, NHS England has been reviewing plans for the further delegation of commissioning responsibilities to include specialised services, vaccinations, screening, and child health information services (CHIS). Specialised commissioning delegation will take place in April 2025. This will include 70 services in total. From this

time ICBs will be legally responsible for commissioning these specialised services rather than NHSE. The delegation of vaccination services etc. will follow in April 2026.

NHS England will retain responsibility for commissioning some specialised services which are not suitable and/or ready for delegation, including all highly specialised services. There are no plans to delegate the commissioning of health and justice or sexual assault and abuse service (SAAS) functions. Commissioning responsibility for these will remain with NHS England, together with healthcare for serving members of the Armed Forces and their families registered with defence medical services, veterans' mental health and prosthetic services.

Further updates will take place throughout the process of transferring the commission of the 70 services ahead of transfer next year.

3. NHS South Yorkshire

3.1 Changes to the NHS South Yorkshire Board

NHS South Yorkshire and Barnsley Metropolitan Borough Council have started the joint process of recruiting a replacement for Wendy Lowder, who retires in February 2024. Wendy's unique role combines the NHS Place Director with the local authority Place Health and Adult Social Care role.

Will Cleary-Gray, Executive Director for Strategy and Partnerships, will take up a new NHS role in Gloucester at the end of September. We will not replace the role and other colleagues will take responsibility for all aspects of this portfolio. Sarah Perkins, Director of Performance and Delivery, who has taken AEO responsibility for EPRR and operational planning, and her role will now be designated as executive to reflect this.

3.2 Data and Insight Strategy

Our communities will soon start to benefit from improved care services following publication of a new system-wide data and insights strategy for health and social care. Our new two-year data and insights strategy focuses on five areas to harness the data-driven transformation in health and care, creating a secure and privacy-preserving system that delivers for both people using health and care services and those working in them.

It means those using health and care services will see more personalised services and it will bring together more information in real-time to help those running services to ensure you are seen as quickly as possible.

To give patients greater confidence than ever that their personal information is safe, secure data environments are being rolled out nationally for NHS and adult social care organisations to provide access to de-identified data for research. This means data linked to an individual will never leave a secure server and can only be used for agreed research purposes.

4. NHS South Yorkshire Place Updates

4.1 Sheffield

NHS providers across Sheffield are continuing to lead and develop research studies and clinical excellence across a range of conditions to improve care for patients. Recent announcements include:

- Parents-to-be at Sheffield Teaching Hospitals are being offered the opportunity to be part of a national research study aiming to improve detection of cataracts in newborn babies. The UK-wide study, funded by the National Institute for Health and Care Research, will look to see if using a new hand-held digital imaging device is a more accurate way to detect cataracts in newborn babies than the current technique.
- Diabetes clinicians have opened a groundbreaking trial aiming to reverse the lifetime risks of nerve damage in people living with type 2 diabetes. The new trial at Sheffield Teaching Hospitals, known as OCEANIC, will build on recent evidence that shows that intensive management of blood glucose (sugar) levels can prevent the progression of nerve damage in people with type 1 diabetes.
- The Neuromuscular team at Sheffield Children's recently became a Muscular Dystrophy UK Centre of Clinical Excellence with Research. The Neuromuscular team at Sheffield Children's provides care and support to children with disorders of nerves and muscles, and related conditions from birth through to transition to adult services.

4.2 Doncaster

NHS South Yorkshire leaders recently met with colleagues from Doncaster's voluntary sector to hear about their work and to discuss how they can work more closely to collaborate on prevention and tackle health inequalities.

This meeting was the third in a series of meetings arranged by the South Yorkshire Voluntary, Community and Social Enterprises (VCSE) Alliance, following similar meetings in Sheffield and Rotherham. This was held at Doncaster's creative health charity The Point, which is the largest participatory arts organisation in the UK.

This discussion included a presentation on Breathe and Connect, supported in partnership with Doncaster and Bassetlaw NHS Foundation Trust, which is a project to support adults with breathing pattern disorder, and Tuneful Chatter, which is a project supporting children with school readiness for the best start in life.

4.3 Rotherham

The Rotherham Safeguarding Children's Partnership have agreed the Child Exploitation Strategy 2024-29: A vision for managing risk outside the home. Over the last 10 years the NHS in Rotherham has worked closely with Rotherham Council and South Yorkshire Police to make sure we have robust arrangements in place to safeguard our children, and to support victims of exploitation.

The strategy sets out how organisations will keep children and young people safe from child exploitation over the next five years. Child exploitation includes child sexual exploitation, child criminal exploitation, radicalisation, modern slavery, human trafficking and honour-based violence.

The new strategy will address a number of local priorities. This includes continuing to ensure there is an effective response to tackling exploitation through effective early identification and prevention services embedded in communities, the right learning and development offer for all relevant organisations and community groups, ensuring robust safeguarding processes and systems are in place, the continued provision of support to victims and survivors of exploitation, and identifying offenders of exploitation to bring them to justice.

Preceding the ten-year anniversary of the publication of the Jay Report, the strategy demonstrates the continued commitment by partners to listening to the voice and lived experience of victims and survivors and using this to develop services. There remains a focus on community engagement and partnerships with families, parents and carers and children and young people in the strategy that will be a key priority for its duration.

4.4 Barnsley

Barnsley's Pathways to Work Commission report has been published setting out the need for a major shake-up of the benefits system and how government, councils, employers and other agencies work together to help more people back into work. The Commission has carried out the nation's biggest deep dive into 'economic inactivity', which refers to the growing number of people who are out of work and not seeking a job now.

The commission's wide-ranging research suggests seven in ten people who are currently economically inactive would like to take a job that is aligned to their skills, interests and circumstances. The unemployment rate in Barnsley is lower than the national average at 2.9%. These are the people actively looking for work. Economic inactivity is different and is a national challenge. It includes those who are currently out of the labour market due to disability, poor health, or caring responsibilities, as well as early retirees, students, and those whose illness or disability means they simply cannot work.

The panel of global experts is led by Rt Hon Alan Milburn, former Cabinet Minister and social mobility champion. The commission took evidence from employers, educators and experts and carried out interviews with 750 South Yorkshire residents affected by economic inactivity. Among wide-ranging recommendations is a pilot programme which would support 2,200 people into work over a four-year period. This would require investment of £10m, but would in turn generate almost £70m in economic benefits, including a £28m reduction in benefits payments.

5. General Updates

5.1 National Centre for Child Health Technology update

The NCCHT will be a world-class facility dedicated to creating a healthier future for children and young people through innovation, technology and outstanding care. The development has received regional and national funding from the UK Government, South Yorkshire Mayoral Combined Authority and The Children's Hospital Charity.

The centre will be built on The Olympic Legacy park in Sheffield and will have four floors with state-of-the-art facilities and all the spaces needed to design, create and test new child health technologies. It will bring together our universities, industry experts, healthcare professionals, and children and young people to focus on obesity, mental health, disease prevention, disabilities, maternal and child health, cancer, long-term conditions and transition.

The final design stage has now been completed so that contractors can be invited to register their interest, and a lease of the land has been agreed. The full business case for the National Centre for Child Health Technology is going to Sheffield Children's Trust Board in November 2024 and communications materials are being developed for a full launch to communities at that time.

5.2 Awards

Teams from across South Yorkshire have been shortlisted for the 2024 HSJ Awards, with five categories being represented. The nominees from South Yorkshire are:

- Digitising Patient Care Award - Primary Care Sheffield - Maximising access in primary care using scalability and digital triage.
- Mental Health Innovation of the Year - South West Yorkshire Partnership Foundation Trust - Perinatal peer support workers.
- Place-based Partnership and Integrated Care Award - NHS South Yorkshire Medicines Management Team - The Rotherham Care Homes Hydration Project
- Towards Net Zero Award - Sheffield Childrens Foundation Trust - Sheffield Children's Nitrous Reduction Programme
- Workforce Initiative of the Year – NHS South Yorkshire - Centralised recruitment for newly qualified midwives

In addition, NHS South Yorkshire launched its own Star Awards, with the first winner being Katie Dowson, Programme Director for Digital Transformation from the Digital, Data and Technology team. Katie is leading a bold and innovative approach to tackling digital inclusion in Doncaster that has recently been widened to South Yorkshire.

Gavin Boyle

Chief Executive NHS South Yorkshire Integrated Care Board

Date: 4 September 2024