

Executive Summary
Report to the Board of Directors held in Public
Being Held on 28 January 2025

Subject	System and Partnerships Updates
Supporting TEG Member	Mark Tuckett, Chief Strategy Officer
Compiled by	Sarah Dew, Strategy and Partnerships Director
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 Board meeting held on 9 December 2024 can be found at the following link ([here](#)).

At our Board meeting on the 24 September 2024, it was agreed to regularly 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 in December to an average of 220 per day, this was 15.88% of all available general and assessment beds, noting over 100 surge beds were open each day throughout December. In January we recorded our highest number of patients with no criteria to reside at 303 and highest ever bed occupancy at 1530. Work continues with Place partners to recover the position back to trajectory.

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](#)).

We are involved in the System Delivery Group within the SYB Acute Federation. Kirsten Major attends 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.

Areas of work that have progressed with the SYB Acute Federation since the last report to Board include ratification of Consensus and Guidance on the Primary and Secondary Care Interface in South Yorkshire, developed in partnership with the South Yorkshire Primary Care Alliance. This sets out key principles for care delivery, as well as how activities at the interface of primary and secondary care providers should be managed, including onward referral, provision of fitness to practice certificates, prescribing practices and communication.

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 8 January 2025 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.

Strengthening and developing our partnerships

As well as our existing partnerships, we are also working to develop new partnerships that support the delivery of patient care and achievement of our strategic objectives.

Since the last Board report, this has included the establishment of the Sheffield Genomics Board. The Board is co-chaired by the Medical Director of Sheffield Children’s Hospital and the Chief Strategy Officer of Sheffield Teaching Hospitals and met for the first time on 2 December 2024. The Board includes representation from clinical genetics, laboratory, pharmacy and clinical services in South Yorkshire, as well as university representation. The Board reports into respective Trust Executive Groups at the two hospitals and the North East Yorkshire Genomic Medicine Service. It will oversee the development and delivery of a genomics strategy for South Yorkshire, ensuring that we maximise the opportunities for patient care from the developments in clinical genetics, genomic testing and genomic therapies.

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	28/1/2025	



Enclosure 7

Chief Executive Report
Integrated Care Board Meeting

8 January 2025

Author(s)	Gavin Boyle, SY ICB Chief Executive	
Sponsor Director	Gavin Boyle, SY ICB Chief Executive	
This report provides assurance against the following risk(s) on the ICB's Board Assurance Framework, Risk Register or Issues Log:	N/a	
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 by the Committee		
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.	✓	Priority 2 - Tackling inequalities in outcomes, experience, and access.	✓
Priority 3 - Enhancing productivity and value for money.	✓	Priority 4 - Helping the NHS to support broader social and economic development.	✓
In addition, this report also provides evidence against the following corporate goals (place ✓ beside all that apply):			
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 Resource Implications (including Financial, Staffing etc)?			
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
8 January 2025

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 November and December 2024.

2. Integrated Care System Update

2.1 NHS Change and Darzi Independent Investigation

NHS South Yorkshire has submitted its response to the 10-Year Health Plan. This followed the release of the Darzi independent investigation, which was published in September. We are also working through our community networks to support people whose voice often goes unheard to have their say.

Our response reflects the four aims of the ICB and the bold ambitions of our integrated care strategy. Our emphasis is on children and young people and how to give them the best start in life; a focus on prevention, health inequalities and the wider determinants of health; the relationship between good jobs and good health, and our role as an anchor institution supporting the wider social and economic development of SY.

We also highlighted the issue of the importance of investment in primary and community health and social care. As part of this, we need to support the workforce capacity and capability in primary care to deliver multidisciplinary models and integrate neighbourhood teams. The response included the need for parity in mental health, emphasising the need to take a personalised approach encompassing mental health and wellbeing as well as physical health.

We raised how a change in the financial arrangements in the NHS could see a greater focus on prevention and the shift of care from secondary to primary and community settings, as well as the capital to help transform our physical estate and invest in longer-term solutions such as digital. Our full response is published in these Board papers.

2.2 Government's white paper on English devolution.

The UK government's recent white paper on English devolution, titled "Power and Partnership: Foundations for Growth," outlines several key initiatives aimed at enhancing health and wellbeing across the country. The white paper introduces a bespoke duty focused on health improvement and reducing health inequalities which includes the mayoral Combined Authorities. This duty is designed to complement the existing health improvement responsibilities held by upper-tier local authorities. The government plans to collaborate with combined authorities, local councils, and the NHS to implement this approach.

A central goal of the white paper is to tackle regional disparities in health outcomes. By granting local authorities greater control over areas such as economic development, skills training, and transport infrastructure, the government seeks to address the underlying determinants of health and promote equitable health improvements across regions.

The government emphasizes the importance of collaboration between combined authorities and health institutions. Strategic authorities are encouraged to work closely with the NHS and public health bodies to ensure that devolved powers lead to tangible health benefits for local populations.

SY Yorkshire is identified as a leader in adopting this approach through our Integrated Partnership whose Board is chaired by the South Yorkshire mayor. We will continue to work with our four local authorities, SYMCA and wider partners to develop this way of working as the government's Bill is formed.

2.3 Economic inactivity investment

NHS South Yorkshire, together with SYMCA and local authorities are pioneering an approach to tackle economic inactivity. As part of the Government's Get Britain Working White Paper, South Yorkshire will receive up to £10m of funding for a trailblazer programme, focussed on improving the support available to people who are economically inactive due to ill health, helping them return to work.

As part of the trailblazer, the South Yorkshire Integrated Care System will also become an NHS England Health and Growth Accelerator area, receiving up to £8m. This will help develop evidence of the impact of targeted action on the top health conditions driving economic inactivity. SYMCA and the South Yorkshire ICS will work together to integrate the support to tackle economic inactivity.

These programmes will build on the recommendations of the Pathways to Work Commission, which was led by Barnsley Council in partnership with the South Yorkshire Mayoral Combined Authority. The report outlined the need for a proof-of-concept model that brings together work, health and skills support in a radical new approach to help people overcome barriers to employment. Pathways to Work Commission suggested that 10,000 South Yorkshire residents could get back into work over the next four years.

2.3 Integrated Care Partnership Board

The Integrated Care Partnership met in Doncaster on 28 November 2024. This included a focus on work and health as part of the investment into economic inactivity. There is a close relationship between having a good job and being in good health so funding mentioned in the previous item will help towards our ambition of making SY the healthiest place to live.

The ICP heard about the work being done in the housing sector. Nick Atkin, CEO of South Yorkshire Housing Association, shared the work being done to try to keep people living in their own homes and reduce the need for temporary housing. This followed the recent SY Housing & Health Summit. The discussion included how housing has a big impact on the lives of children, and whilst it might not be as evident as adult homelessness, child homelessness is every bit as real. The ICP supported

the further work recommended following the Summit.

In addition, the Board discussed the VCSE Alliance plan and introducing opportunity to explore shared investment funds, and the Cancer Alliance progress on the South Yorkshire 'Shows up Campaign' and Cancer Strategy.

2.4 Financial Plan 2024/25

The NHS in South Yorkshire agreed a plan with NHS England for a deficit end of year position of £49m. This required the ICB to breakeven, the providers to have a deficit no greater than £49m and the delivery of a further £48m system savings target. The total efficiency requirement for the system is £258.5m, which is greater than delivered previously.

At the end of September, the system received £49m funding from NHSE to offset the provider's deficit plans. Consequently, the system is now working towards a breakeven plan.

At the end of November, the system deficit was £47.3m which was a variance against plan of £35.1m. This was a small improvement on the previous month. Of this variance £16.2m relates to the ICB due to excess continuing healthcare and prescribing costs, £8m to provider Trusts reflecting increased demand for emergency care, and £10.9m due to under-delivery of the additional system savings requirement.

A System Efficiency Board has been established to improve performance against the plan and specifically to identify programmes of work to address the additional system efficiency target of £48m. This includes improving efficiency in elective and nonelective care, workforce, estates, and non-pay spend. The Acute Federation, MHLDA Alliance and our four place partnerships are engaged in this work, and we are also receiving additional support from NHSE and Deloitte.

2.4 Winter and Flu and Covid Vaccination Campaigns

Demand for urgent and emergency care services has started to increase and this saw performance reduce towards the end of 2024, although still above 70%. Throughout winter we're encouraging our communities to stay well and be prepared, including promoting the Pharmacy First campaign, where pharmacists can now manage a further seven conditions ranging from Sinusitis to uncomplicated urinary tract infections.

In addition, we have now vaccinated 230,000 people for a Covid booster, which is 42% of those eligible, and 450,000 people for their flu vaccination, 50% of all those eligible. The highest uptake is amongst those in care homes and over 65s. As part of this we have also vaccinated more than 11,000 housebound patients, who although not part of the priority groups, can often be vulnerable. The vaccination programme continued ahead of the festive period. During that time we continued to do everything possible to ensure those that want to be vaccinated are able to.

2.5 General Practice Collective Action

The contractual dispute between the Government and the British Medical Association, representing GPs, continues. The BMA are asking GP partners to take at least one of nine possible actions, none of which breach the GP contract. We are continuing with regular dialogue with our Local Medical Committees and making appropriate mitigations wherever possible to support patients. We are also ensuring regular updates are reviewed with secondary care providers in the area. The NHS is asking the public to come forward as usual for care, especially during the critical winter months when many in our community are vulnerable, during collective action. Patients with an appointment at a GP practice, should attend as usual unless told otherwise.

3. NHS South Yorkshire

3.1 Primary Care update

Across South Yorkshire the NHS has a contract with 170 General Practices, 152 Dentists, 151 Opticians and 309 Community Pharmacies, which comprise 90% of all healthcare appointments. A large majority still rate their experience as Good (76% General Practice, 87% Community Pharmacy, 75% Dentistry) and 87% of people feel they are treated with care and concern by professionals. However, 42% of people In SY still report difficulties in contacting their GP. To meet this challenge all of our practices now have cloud-based telephony systems in place.

The South Yorkshire Primary Care Alliance recently held a time out to firm up our plans for the next 12 months aligned to the priorities of access, workforce, digital and integrated neighbourhood teams. Our Community Pharmacies continue to be at the heart of transformation on our patch. They have delivered 77,000 minor ailment appointments since the launch of Pharmacy first.

3.2 Board changes

Wendy Lowder, Executive Director for Barnsley Place and the Director of Adult Social Services at Barnsley Council, retires in February 2025. Katy Calvin-Thomas has been appointment into this joint role. Katy has extensive experience and an impressive track record in health and social care leadership, bringing together priorities across health and social care. She has served as Chief Executive of the Manchester and Trafford Local Care Organisation since 2017, following her role as Director of Strategy.

Katy has overseen the development and delivery of one of the largest integrated community health and social care organisations. With a deep commitment to place-based, integrated services, Katy is known for her dedication to joint commissioning, empowering communities, and championing health and social care initiatives that drive positive outcomes.

4. NHS South Yorkshire Place Updates

4.1 Sheffield

Sheffield Children's NHS Foundation Trust has approved the full business case for the National Centre for Child Health Technology. This will be on the site of the Olympic Legacy Park and building will start this year using funds from various partners, including Sheffield City Council, SYMCA and The Children's Hospital Charity. It's

anticipated that the centre will open for the Children's Hospital's 150th anniversary. The final pledge of funding came from Sheffield City Council, which approved an £8.8m investment.

4.2 Doncaster

Doncaster and Bassetlaw Teaching Hospitals are investing in a Robotic Rehabilitation Suite, believed to be one of the first of its kind in the NHS, to support stroke recovery. The suite will aid those treated with mobility, limb functionality, and cognitive recovery. Among the devices is an advanced functional electrical stimulation tool that enhances hand motor recovery through high-tech electrodes linked to a tablet for precise and rapid therapy.

The suite will support Montagu Hospital towards providing rehabilitation services seven days a week, addressing growing demand. Over time, the enhanced service is expected to support patients from a wider area, establishing the hospital as a hub of excellence in South Yorkshire for stroke care.

4.3 Rotherham

Independent inspectors have praised Rotherham's services for children and young people with special educational needs and disabilities (SEND). Following a three-week inspection in early October 2024, Ofsted and CQC inspectors assessed children's services, looking at arrangements for education, health and social care services for children and young people with SEND across the borough.

There are three possible inspection outcomes in the SEND framework with Rotherham's children's services receiving the highest outcome of: 'the local area partnership's SEND arrangements typically lead to positive experiences and outcomes for children and young people with SEND. The local area partnership is taking action where improvements are needed'. This means the services won't need to be inspected again for five years.

They found 'most children's and young people's needs are identified and assessed quickly and accurately' and they 'enjoy attending a range of mainstream schools and specialist provisions'. The report also highlighted that children and young people are valued and visible in their communities.

4.4 Barnsley

Barnsley Hospital NHS Foundation Trust has had recent significant success in recruiting newly-qualified nurses. Nearly 50 new nurses will also take up roles in medical and surgical wards, intensive care, outpatients, short stay unit, acute medical unit, endoscopy and respiratory care unit. The Trust's Workforce Development and Student Support Team has launched a new 'Prepare to Nurse' week. The nurses will undertake the 'Preceptorship' programme which helps new nurses to be supported during their first year in their new roles as Registered Nurses. The Trust has previously been recognised for its Preceptorship programme with the National Preceptorship Interim Quality Mark.

5. General Updates

5.1 South Yorkshire Innovation Showcase

More than 100 leaders and experts from across health, care, research and innovation came together for the South Yorkshire Innovation Showcase. More than 70 applications were received for the event and judges eventually selected 10 teams to speak to the audience, which included Oliver Coppard, Mayor of South Yorkshire. The five categories of initiatives aligning with the strategy bold ambitions:

- Focus on development in early years so that every child in South Yorkshire is school ready.
- Act differently together to strengthen & accelerate our focus on prevention and early identification.
- Work together to increase economic participation and support a fair, inclusive and sustainable economy.
- Collaborate to value & support our entire workforce across health, care, VCSE, carers, paid, unpaid. Developing a diverse workforce that reflects our communities.
- Open category for other cross-cutting themes.

A range of presenters have been nominated to speak at this year's NHS Expo in Manchester to share best practice. We will know when these have been accepted in Spring.

5.2 Anti-racist Assembly

A South Yorkshire Anti-Racist Assembly took place in November 2024 bringing together partners from across the region, particularly those working in EDI, organisation leaders, staff network leads and allies. Becoming an actively anti-racist health and care system is one of our joint commitments through the Integrated Care Strategy.

All NHS organisations have all adopted the North West Race Equality Framework – as systematic programme of work for organisations. Speakers at the event included colleagues from Sheffield Health and Social Care and Rotherham, Doncaster and South Humber, who provided an update on their own progress in pursuing the standards set out in the framework. The discussion included the long-term cultural change that is needed, but that there are practical actions that organisations can take now. As the largest employer in South Yorkshire the NHS has a responsibility to set the standard in anti-racist employment practices for others to follow.

5.3 Baton of Hope

NHS South Yorkshire has signed up to the Baton of Hope Workplace Pledge. This pledge is designed to eradicate the stigma around mental health in the workplace and increasing awareness of suicide. In the UK there are 6,000 deaths by suicide annually and acute mental health conditions account for over 55% of all lost working days annually in the UK. By supporting the pledge NHS South Yorkshire is committed to open conversations to increase awareness, improve and do our best to save lives and make support and prevention in the workplace a priority.

5.4 Awards

NHS South Yorkshire ICB Medicines Management Team and The Rotherham NHS Foundation Trust, Nutrition and Dietetics Team were winners in the Place-based Partnership and Integrated Care Award category for their Care Homes Hydration Project at the HSJ Awards.

The Rotherham Care Homes Hydration Project was launched in 2022 to address rising rates of urinary tract infections (UTIs) and antibiotic use in local care homes, after it was discovered that care home residents were 10 times more likely to be dehydrated than residents from their own homes, showing the need for training and support.

For older people living in care homes, staying hydrated can help reduce UTIs which can sometimes lead to more serious complications requiring unnecessary antibiotics or an avoidable hospital admission. By providing education and training to care home staff on hydration interventions, the project successfully improved the hydration in older people, which decreased the number of UTIs, decreased the unnecessary use of antibiotics and even reduced the number of times ambulances were called. Over 1,000 care home staff received face-to-face training as part of the project which is now expanding across South Yorkshire.

In addition, the Local Maternity & Neonatal System team were nominated for the HSJ Workforce Initiative of the Year for the Centralised recruitment for newly qualified midwives.

The NHS South Yorkshire Star Awards recent winners were:

- Kate Woods, Project Implementation Officer from SYB Cancer Alliance, won the Star Award in November 2024. Kate has led work around the Cancer Alliance's 'Psychosocial Support' priorities that has been inclusive and helped the Alliance to underpin onward improvement actions.
- Sam Humphries, Secondary Care Project Lead in the Medicines Optimisation Team, won the Star Award in December 2024. Sam was nominated for his outstanding work on the DAISY (Delivering Asthma Improvement in South Yorkshire) project, which will see thousands of asthma patients across South Yorkshire having their asthma care optimised, improving asthma outcomes and reducing asthma deaths.

Gavin Boyle

Chief Executive NHS South Yorkshire Integrated Care Board

Date: 8 January 2025