

Board of Directors – Public

SUMMARY

Meeting Date: 27 September
Agenda Item: 07

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| Report Title: | Chief Executive Briefing | |
| Author(s): | Salma Yasmeen, Chief Executive | |
| Accountable Director: | Salma Yasmeen, Chief Executive | |
| Other meetings this paper has been presented to or previously agreed at: | Committee/Tier 2 Group/Tier 3 Group | N/A |
| | Date: | N/A |
| Key points/recommendations from those meetings | N/A | |

Recommendations

The Board are asked to consider the items discussed in this report in relation to impact on our strategic priorities and risks.

Domestic Abuse & Sexual Violence (Launch of the NHS Sexual Safety Charter and Sexual Safety in Healthcare Organizational Charter):

There is an expectation Boards will sign up to this charter and identify Executive leads. Our lead will be the Executive Director of People working closely with the Executive Director of Nursing, Professions and Quality. Work will take place to ensure the Board has appropriate oversight of the work and that we meet the deadline of July 2024.

Recommendation for the Board/Committee to consider:

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| Consider for Action | | Approval | X | Assurance | X | Information | X |
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The Board are asked to consider the items discussed in this report in relation to impact on our strategic priorities and risks.

The Board are to **confirm** that Sheffield Health and Social Care NHS FT Trust will sign up to the Charter and that the Executive lead will be the Executive Director of People.

Please identify which strategic priorities will be impacted by this report:

| | | | | |
|--|-----|---|----|--|
| Recover services and improve efficiency | Yes | X | No | |
| Continuous quality improvement | Yes | X | No | |
| Transformation – Changing things that will make a difference | Yes | X | No | |
| Partnerships – working together to make a bigger impact | Yes | X | No | |

| Is this report relevant to compliance with any key standards? | | | | | State specific standard |
|---|-----|---|----|---|--|
| Care Quality Commission Fundamental Standards | Yes | X | No | | |
| Data Security and Protection Toolkit | Yes | | No | X | |
| Any other specific standard? | Yes | X | No | | Mental Health Act |
| Have these areas been considered? YES/NO | | | | | If Yes, what are the implications or the impact? If |
| Service User and Carer Safety, Engagement and Experience | Yes | X | No | | As appropriate |
| Financial (revenue & capital) | Yes | X | No | | |
| Organisational Development /Workforce | Yes | X | No | | |
| Equality, Diversity & Inclusion | Yes | X | No | | |
| Legal | Yes | X | No | | |
| Environmental Sustainability | Yes | X | No | | |

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National Context and Developments

1. Verdict in the Trial of Lucy Letby

It has been a time of deep reflection for many of us who work in public services since the conclusion of the trial of Lucy Letby. This is a moment that demands collective reflection and for us to deepen our resolve and commitment to continue to nurture and develop an organisation that prioritises safety and quality and fosters an open culture and trust. The Government has ordered a statutory inquiry that will look at the circumstances surrounding the deaths and incidents, including how concerns raised by clinicians were dealt with, the handling of concerns, the effectiveness of governance, and what actions were taken by regulators and the wider NHS. This brings legal powers to require people to engage with the Inquiry and has been welcomed. There are also calls to regulate managers in the NHS and this is currently actively being considered. It is worth noting that this has been considered by several reviews over the years, with governments stopping short of regulation. This has been due to several factors, such as multiple regulations of clinical managers.

Since the verdict was announced we have taken immediate action and continue to act. I personally wrote to all staff in my weekly blog to reinforce our commitment to continuing to nurture and develop a restorative and just culture, enabling everyone's voice to be heard, and keeping people at the centre of everything we do, particularly those most vulnerable in our care. We have also reinforced our approach to raising concerns including the role of the Freedom to Speak Up Guardian and Champions and we will continue to encourage reflection, learning and open discussions in all our teams. The Executive Management Team now meets formally fortnightly and will use this forum to operationally triangulate issues and concerns picked up across the team and through our governance processes as well as through the Freedom to Speak Up Guardian to identify hot spots and areas that require executive level leadership and support. The Chair and Chief Executive also submitted a Trust response to the South Yorkshire Integrated Care Board to provide further assurance that we have an established approach to enabling staff to raise concerns and respond to these concerns. The Chair and Chief Executive attended a meeting hosted by NHS England which focused on culture, leadership and management, patient safety and quality and regulation for managers.

During our Confidential Board meeting later today we will be further reflecting on our approach and the assurance arrangements in place within Sheffield Health & Social Care NHS Foundation Trust.

2. Fit & Proper Person Test Framework (FPPT)

The new Fit & Proper Person Test (FPPT) framework has been put into place in response to recommendations from the Tom Kark KC 2019 review of the FPPT and is applicable from 30 September 2023.

The Framework introduces new and more comprehensive requirements around board appointments and annual review. It is recognised by NHSE that the new arrangements will take time to implement. It is designed to assess the appropriateness of individuals to discharge their duties effectively as Board members through more comprehensive requirements around board appointments and annual review. The Chair of the Board of Directors is being supported by the Company Secretary (Director of Corporate Governance) and the Executive Director of People to implement the requirements. Alongside this, NHSE are working towards co-producing a Leadership Competency Framework (LCF) for Board level roles and this is due imminently. A new Board appraisal framework will also be published, incorporating the LCF, by March 2024 which all Board members will be required to use.

3. Domestic Abuse & Sexual Violence (Launch of the NHS Sexual Safety Charter and Sexual Safety in Healthcare Organizational Charter)

NHS England released its first ever charter on sexual safety at work on 7 September 2023, with ten pledges for organisations to follow to safeguard staff. The new charter asks employers to commit to a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours towards our workforce.

The new charter asks employers to focus on three priority areas:

- appoint domestic abuse and violence leads;
- review policies;
- support and sign up to the domestic abuse and sexual violence programme platform on Future NHS.

Our Executive Director of People will lead this piece of work, working closely with our Executive Director of Nursing, Professions & Quality, to review our current policies, procedures and practice to ensure that we meet the requirements of the [Sexual Safety Charter](#), by the July 2024 deadline. It is expected that all Boards will sign up to and fully support the recommendations in the charter. We have registered our commitment as a Trust and seek full Board support for the recommendations in the charter. A more detailed assessment and plan for the work will be presented at a future Board meeting.

The Board are asked to confirm that Sheffield Health & Social Care NHS FT will sign up to this Charter and that our Executive Director of People, will be our identified lead.

4. Major Conditions Strategy

On 14 August 2023, the Department for Health and Social Care (DHSC) published an interim case for change and strategic framework as part of the Major Conditions Strategy. The document sets out the evidence underpinning the strategy and provides an overview of initial plans for action over the next five years. The full strategy document is expected to be published in early 2024, following analysis of responses to DHSC's call for evidence, which closed on 12 July 2023, and further consultation with stakeholders.

The Strategy will aim to improve health outcomes and better meet the health and wellbeing needs of local populations. It should contribute to the broader Government goal to narrow the gap in healthy life expectancy between local areas where it is highest and lowest by 2030 and to raise healthy life expectancy by five years by 2035, as laid out in the Levelling Up White Paper. The strategy will recognise challenges facing society, specifically around multi-morbidity in ageing populations. People with two or more conditions account for around 50% of hospital admissions and over half of NHS costs.

The strategy will focus on six major conditions: cancers, cardiovascular disease (CVD) including stroke and diabetes, musculoskeletal disorders (MSK), mental ill health, dementia and chronic respiratory disease.

The Government aim to remove pre-existing siloes between diseases and increase the provision of holistic, joined up and personalised care for patients. This approach reflects the broader shift towards integrated care and the creation of Integrated Care Systems following the Health and Care Act 2022. The general direction supports the approach that the Trust is developing and through the continued work with our partners in place and through our Mental Health Learning Disabilities and Autism Provider Collaborative in developing holistic joined up approach to support and care that will focus on prevention and early help.

Local and Regional System and Partnership Context and Developments

5. Establishment of a NHS South Yorkshire Integrated Care System Equality, Diversity & Inclusion Board.

The Integrated Care Partnership has made a joint commitment to tackle systemic discrimination with a focus on anti-racism, with a key aim to have a workforce that reflects the diversity of our population. The national NHS Equality Diversity Inclusion (EDI) Improvement plan also sets out six high impact actions which will require significant leadership to achieve. There is a role for us all, as organisations, as a South Yorkshire system and NHS England, however, together, we can set out and understand the leadership challenge and responsibility and hold ourselves and each other accountable for making these changes in our system.

To meet this commitment, a board-level South Yorkshire EDI Leadership Group is being established, which will be chaired by the Chair of the ICB Pearse Butler. Addressing systemic discrimination is challenging and to co-ordinate actions, learn from each other, hold us accountable as a system and as employers within that system, it is believed that a board-level leadership group will provide the necessary strong and visible leadership commitment and accountability.

The group will consist of board-level members initially from across all the NHS Trusts and it has been agreed that our Executive Director of Operations & Transformation will represent Sheffield Health & Social Care NHS FT on this group. Meetings will be quarterly and regular reports will be provided to the Board as this group develops its remit and role.

6. NHS South Yorkshire – Revised Operating Model and Running Cost Allowance

In March 2023 NHS England announced that the running cost allowance for ICBs will be reduced by 30% by the beginning of 2025/26. Running costs relate to those staff supporting commissioning, planning and operational functions of the ICB and non-pay costs.

Other posts in direct patient facing or clinical service roles are not affected. NHS SY ICB have undertaken an organisational design process to develop a new set of working arrangements. This process has involved staff, Trade Unions and system partners. Formal consultation will take place during September and October.

7. South Yorkshire Mental Health Learning Disabilities and Autism Provider Collaborative (MHLDA PC)

An away day was held in August to revisit the vision and ambitions of the Provider Collaborative as well as agree priorities going forward.

Priorities agreed include whole system redesign of Eating Disorders pathways, improving Learning Disabilities and Autism pathways and care, improving Urgent and Emergency Care pathways including health-based place of safety. Work commenced to shape and define parity of esteem in our system.

NHS SY ICB has supported funding for additional capacity to support the MHLDA PC. Additional posts will be hosted by Rotherham Doncaster and South Humber NHS FT (RDASH) on behalf of the system. We are a partner in all these programmes and our Executive Medical Director is the SRO for the Learning Disability and Autism workstream. The collaborative work will enable us to improve care delivered across our Place and the System as well as ensure that pathways of care that have been historically underfunded are commissioned at the right level.

Local Context and Developments

8. Operational Performance and Winter Planning

The operational performance of our clinical directorates is governed through our Integrated Performance and Quality Framework. Board Committees continue to receive monthly assurance about our plans to reduce community-based waiting lists and to improve the experience and outcomes of our patients while waiting.

We are working with partners to finalise our winter plan to ensure operational resilience across Urgent and Emergency Care. This includes additional financial support through the Better Care Fund to improve the timeliness of hospital discharge. We continue to work on reducing our out of area bed usage. Throughout August the number of people waiting for hospital care increased as a result of delays in identifying social care support once our patients are clinically ready for discharge. We are working in partnership with Sheffield City Council to address this issue.

9. Vaccination Programme – Flu

NHS England has recently announced that it is bringing forward the Flu and Covid19 vaccinations programme in England. Vaccinations are our best defence against respiratory illnesses like Covid19 and Flu, so we are taking pre-emptive action to make us all safer ahead of winter.

Our vaccination teams will start vaccinating some of our most vulnerable service users and staff earlier than planned. Vaccinations will begin week commence 11 September when we will offer Flu and Covid19 vaccinations to service users on our older adult wards; service users who are pregnant and service users who are immunosuppressed. From 18 September vaccinations will be offered to staff who work within our older adult wards and care homes.

All other staff groups will be offered a Flu and Covid19 vaccine from 2 October 2023 and this year the vaccinators will work out of a purpose-built vaccine hub at the Michael Carlise Centre but also at places of work via a mobile vaccine van we have been able to secure through a sponsor.

By vaccinating the most vulnerable first, we can make sure we protect those who need it most and get a head start with our vaccinations to ensure as many of us are protected against respiratory illnesses by the end of October. This will help make sure our services are safe for service users, staff and visitors.

10. Legionella Outbreak

On Friday 18 August, routine testing identified increased levels of legionella bacteria within the water system at our Lightwood Site. Immediate action was taken to ensure the safety of our staff and service users. We relocated service users who were staying at Beech to an alternative site. We also took immediate action to deliver alternative sources of water to Woodland View home to ensure care was delivered to a safe standard.

We received mutual aid from Sheffield Teaching Hospitals and our system partners in Place and would like to take the opportunity to thank them.

The collective efforts of all staff meant that colleagues and service users were safe, and care continued to be delivered in line with our Trust values. Care at Woodland View returned to normal after further testing showed us that the legionella bacteria was present only at Beech and two unused areas of Woodland View.

Repeated testing confirmed that the high levels of legionella bacteria were isolated to a disused water outlet at Woodland View and to some water outlets at Beech. We have now undertaken remedial works to Beech, which include the installation of a new pump and a new plate heat exchanger which increases the flow and heat of water.

On the 19 September, the Beech site was considered safe for occupation by our Authorised Engineer, Consultant Microbiologist and our Infection Prevention and Control Department. This has enabled us to enact plans to relocate our patients and staff back into the unit. We are continuing remedial works to the disused areas of Woodland View, but this does not impact patient care.

11. Industrial Action

Industrial Action has continued throughout the summer. Doctors in training and consultants have taken strike action on a number of periods in June, July and August 2023. At the time of writing this report there is no indication of an early resolution to these disputes with the Government.

The British Medical Association (BMA) Consultants Committee has scheduled further walkouts. Hospital consultants will take part in strike action on 19 and 20 September and from 2 to 4 October. Junior Doctors will strike from 20 to 22 September and from 2 to 4 October. The joint strike action in October will inevitably pose further challenges and risks.

Colleagues continue to work together to ensure the safety of our service users and those staff on duty, while supporting our medical colleagues, and the usual command structure is in place during any action to ensure business continuity. However the continued strike action is inevitably having an impact on our capacity to address waiting times and delays in some services.

12. Transformation

Despite the challenging operating context, our strategic transformation programmes and projects continue to progress with key areas of progress and risk reporting into the Transformation Board and into Finance & Performance Committee.

As a result of discussions during August, the Electronic Patient Record project has significantly revised its plans with an agreed go live date, governance arrangements have been strengthened with the introduction of the Clinical Executive Safety Group and strong shared ownership of revised plans is in place.

Other key transformation programmes being progressed include our community learning disabilities model, significant work to redesign our community mental health recovery services to be better aligned to localities and neighbourhoods is progressing as well as our primary and community transformation programme.

13. Financial Position at 31st July 2023

The national, regional and local context and financial landscape is increasingly challenging with increasing pay pressures, capacity challenges as a result of on-going industrial action and expected winter pressures. SHSC reported an overspend at July of £1.2m and a forecast for 2022/23 of £3.3m (on plan). Both Place and System are reporting a small variance to the year-to-date plan but are forecasting to deliver plan.

14. National Mental Health Act QI Programme

The Trust Chair and Chief Executive recently attended a breakfast briefing to launch the national Mental Health Act QI Programme, where we discussed national priorities which this programme supports; the aim and building blocks of the programme itself and the expectations of organisations taking part.

Our Executive Medical Director is the SHSC SRO for the project, and our Head of Continuous Improvement, is leading the project team on behalf of SHSC.

Forest Lodge is one of the initial 15 piloting teams for an NHS England commissioned Quality Improvement Programme focused on delivering reforms to the Mental Health Act.

Over two years the programme will support 70 mental health inpatient services to develop and implement co-produced change ideas that put into practice the principles set out in reforms of the Mental Health Act. The aim of the programme is to achieve more equitable partnership between those providing and receiving inpatient care, putting patients at the centre and working alongside them to improve their care.

15. Notable improvements and awards

In ending this report I would like to share some positive news:

Our Early Intervention Service has been rated nationally as a top performing team on a number of standards. This follows a significant amount of change for the team over the last year.

Jamilla Flaherty and Hassan Mahmood, two of our psychiatrists, were nominated for APNA awards. APNA is an NHS network for South Asian leaders to connect, share ideas and support each other. Hassan was recognised for his significant contribution to improving parity of outcomes for South Asian service users and their communities and Jamilla was recognised for her partnership working to tackle structural racism and promoting equality, diversity and inclusion.

We received five nominations for the 2023 Health Service Journal Patient Safety Awards. These awards help drive improvements in culture, safety and quality across the NHS. The results were announced on the 18th September and I am pleased to confirm that:

SHSC won the award for “Best Use of Integrated Care and Partnership Working in Patient Safety” for our Holistic Care in the community project : empowering mental health staff to provide better care for physical health for people with mental health illness in the community

We were also highly commended in:

- The “Developing a Positive Safety Culture” Award category - Let’s talk about sex, improving sexual safety culture within specialist inpatient units in a mental health trust.
- The “Mental Health Safety Improvement” Award category - the impact of HUSH huddles on the rate of falls in older adult inpatient mental health units.
- The “Patient Safety Team of the Year” Award category - Respect Team are here to talk about Restrictive Practice – improvement safety through conversation, collaboration understanding and action.

I would like to take the opportunity to extend my thanks to everyone involved in improving care and services and congratulate the teams and individuals who have been recognised by receiving these awards.

We have also been shortlisted for the Mental Health Innovation of the Year Award for the work we have done on race equity, specifically relating to a joint project between us, Flourish and SACMHA called “Less Talk and More Action”.

In 2022 we ranked 115 out of 226 organisations in doctors’ experience of training. This year we have improved to 27 out of 226 and are the third highest ranked NHS organisation in Yorkshire and the Humber. This is a fantastic improvement, but it hasn’t just happened. Everyone concerned has played a part in making the Trust a great place to train, learn and grow. It has taken focused and deliberate effort and leadership at every level. A special thank you to Director of Medical Education Alex Pavlovic, Medical Education and Staffing Manager Jo Wilson, and their teams for supporting us all on this journey.

SY/jch/Sept 2023