

**Board of Directors**  
**Item number: 27**  
**Date: 30 July 2025**

<b>Confidential / public:</b>	Public						
<b>Report Title:</b>	Governance report						
<b>Author(s)</b>	Amber Wild, head of corporate assurance						
<b>Accountable Director:</b>	Dawn Pearson, associate director of communications and corporate governance						
<b>Presented by:</b>	Dawn Pearson, associate director of communications and corporate governance						
<b>Vision and values:</b>	The Trust vision is to ensure <b>we work together</b> for service users. Corporate assurance ensures that <b>we keep improving</b> , whilst ensuring <b>we are inclusive, respectful and kind</b> .						
<b>Purpose and key actions:</b>	This report provides <b>key updates on governance matters</b> for reporting to Board of directors.						
<b>Executive summary:</b>	<p>The report provides assurance to the board of directors that appropriate monitoring arrangements are in place. The report provides an update on:</p> <ul style="list-style-type: none"> <li>The <b>annual process for receiving declarations</b> of interests, gifts and hospitality for both the Board of directors, governors and staff below the Board for final approval.</li> </ul> <table border="1"> <tr> <td><b>Overall completed</b></td><td><b>71.6%</b></td></tr> <tr> <td><b>Pending</b></td><td><b>2.0%</b></td></tr> <tr> <td><b>Outstanding</b></td><td><b>26.4%</b></td></tr> </table> <ul style="list-style-type: none"> <li>Confirmation of the process for <b>Fit and Proper Person Test (FPPT) Framework compliance</b>.</li> <li><b>Governor elections 2025</b>.</li> <li><b>The annual members meeting 2025</b>.</li> <li>An update on delivering the findings from the <b>Good Governance Institute (GGI) review</b></li> <li><b>Modern anti-slavery statement 2024-2025</b>.</li> <li><b>Register of sealings 2024-2025</b>.</li> <li><b>Annual reports from the Board assurance committees</b> including the final assurance committee terms of reference.</li> </ul> <p><b>Appendices</b> included are:  Appendix 1: register of interests - Board of directors  Appendix 2 register of interests – Council of governors  Appendix 3: register of interests - staff  Appendix 4: Modern Anti-Slavery Statement  Appendix 5: Register of Sealings 2024-2025  Appendix 6: Board assurance committee terms of reference (annual reports available on iBabs and on request)</p>	<b>Overall completed</b>	<b>71.6%</b>	<b>Pending</b>	<b>2.0%</b>	<b>Outstanding</b>	<b>26.4%</b>
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<b>Pending</b>	<b>2.0%</b>						
<b>Outstanding</b>	<b>26.4%</b>						

Which strategic objective does the item primarily contribute to:				
Effective Use of Resources	Yes	X	No	

Deliver Outstanding Care	Yes	X	No		
Great Place to Work	Yes	X	No		
Reduce inequalities	Yes	X	No		
<b>What is the contribution to the delivery of standards, legal obligations and/or wider system and partnership working.</b>					
<p>The Health and Social Care Act 2022 enhances and amends the Health and Social Care Act 2012 Act, setting out the legal framework within which a Foundation Trust operates, which includes the following:</p> <ul style="list-style-type: none"> <li>• Constitution (including Standing Orders for practice and procedures of the Board of Directors and the Council of Governors).</li> <li>• The Accountable Officer Memorandum.</li> <li>• The Codes of Conduct.</li> <li>• Standing Financial Instructions as a framework for financial governance,</li> <li>• Scheme of Reservation and Delegation which describe the powers reserved to and delegated by the Board</li> </ul> <p>These documents together provide a regulatory framework for the business conduct of the Foundation Trust</p>					
<b>BAF and corporate risk/s:</b>	The committee has oversight of all BAF and corporate risks.				
<b>Any background papers/ items previously considered:</b>	This report provides key updates on governance matters for reporting to Board of directors, with the last report received at the meeting in May 2025.				
<b>Recommendation:</b>	<p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the update provided for declarations of interest and process for confirmation of compliance of the fit and proper persons' test.</li> <li>• <b>Note</b> the update on the Governor elections.</li> <li>• <b>Note</b> the update on the annual members meeting.</li> <li>• <b>Note</b> the update on the GGI well-led review.</li> <li>• <b>Approve</b> the modern anti-slavery statement</li> <li>• <b>Note</b> the use of the Trust seal during 2024-2025.</li> <li>• <b>Note</b> the Board assurance committee annual reports and final assurance committee terms of reference.</li> </ul>				



**Board of Directors  
Governance report  
July 2025**

**1. Purpose of the report**

The purpose of the report is to provide key updates on governance matters for Board of directors. The paper includes appended reports, which provide more content and detail. The paper sets out:

- An update on the annual process for receiving declarations of interests, gifts, and hospitality for the Board of directors, the Governors, and staff below the Board.
- Confirmation of the process for Fit and Proper Person Test (FPPT) Framework compliance.
- Modern Anti-Slavery Statement 2024-2025.
- The Board assurance committee annual reports and final assurance committee terms of reference following receipt at the Audit and Risk Committee in July 2025.

The governance report forms part of the annual work programme and provides assurance on all governance related matters each quarter, as well as any updates on key areas of focus. The report sets out the arrangements in place to support appropriate and timely governance and monitoring arrangements.

**1. Declaration of Interests 2024-2025**

As per our managing conflicts of interest in the NHS policy, the annual process in place for the declarations of interests, gifts and hospitality has been underway since December 2024.

Updated declarations for the current financial year for the Board and for all governors currently serving on the Council of Governors is attached at **appendix 1 and 2**. At the time of writing no declaration forms were pending. There were no declarations of gifts and hospitality from any Governors during the financial year.

Updated declarations for the current financial year for all staff above band 7 grade who must respond to and support the call for declarations of interests, gifts, hospitality, and sponsorship is attached at **appendix 3**. There remain some outstanding declarations, and these continue to be followed up with the individuals concerned and the relevant directors to expedite completion.

The table below summarises the current position.

<b>Overall completed</b>	<b>71.6%</b>
<b>Pending</b>	<b>2.0%</b>
<b>Outstanding</b>	<b>26.4%</b>

From a total of 753 individuals, 71.6% (530 individuals) have completed their declaration of interest, 2% (22 individuals) have sent in forms which require further work or approval, and 26.4% (201 individuals) remain outstanding.

The corporate assurance team have made numerous attempts to contact the 201 individuals that have not responded, engaging with their line managers and Executives for their area.



A process continues to be in place to ensure that gaps are identified, and action is taken. Each declaration has been reviewed by the corporate assurance team and followed up with individuals and their line managers where necessary. Relevant registers have been escalated and forwarded to individual directors for oversight.

There has been a significant improvement in engagement compared to last year, where we had response from 46% of individuals (329 responses from a pool of 717 individuals).

Initial discussions have taken place with workforce to migrate the calling in of 2025-2026 declarations from a manual process to an electronic process via the electronic staff record (ESR) which will aim to further improve engagement and streamline efficiency within the corporate assurance team.

## **2. Confirmation of the Fit and Proper Person Test (FPPT) Framework compliance**

In September 2023, NHS England published the 'Fit and Proper Person Test Framework' in response to the recommendations made by Tom Kark KC in his 2019 Review of the FPPT.

The framework is designed to assess the appropriateness of an individual to discharge their duties effectively in their capacity as a Board member and applies to all executive and non-executive directors of NHS Foundation Trusts. The annual process has taken place to meet the requirements for the Trust in respect of new Fit and Proper Person's Test requirements, this means:

- Annual fit and proper self-attestation forms have been completed for all Board members.
- Local FPPT folders have been updated for each Board member
- Work has completed on the electronic staff record for Board members which has been updated to meet the new requirements.
- The Chair has reviewed the FPPT declarations and has confirmed the required processes have been followed and all data captured appropriately to complete the formal sign off process by the 30 June 2025.

## **3. Governor elections 2025**

Governor elections opened for nominations on 28 March 2025. There were 20 vacant seats in the 2025 election process and **14 seats have been filled**. This will bring the **total number of governors on the council to 34**. This means 27 elected governors and eight appointed governors.

Two seats were contested (psychology and social worker) and voting concluded on 18 June 2025. The process of undertaking due diligence on newly appointed governors such as declarations of interest, disqualification registers and to ensure compliance with the Fit and Proper person Test (FPPT) is underway and will be fully completed before governors can assume roles. The aim is to complete the process in time for all governors to be confirmed at the annual members meeting (AMM) in September 2025.

In addition, it has been confirmed that the Pakistani Muslim Centre have confirmed Irfan Khan for a second term of office as an appointed Governor from 1 July 2025. Alistair Brash, young carer governor has stepped down from his role and was thanked for his time and contribution.

Finally, three longstanding Governors have now left. All three governors have added a huge amount of value and have always been generous with both time, skills, and experience. It is noted that each governor has supported the Chair and other governors over some of the



most challenging Trust journeys and have played a critical role towards improvement. The governors who have now left are:

- Terry Proudfoot, service user governor: serving nine years on the Council of Governors, four and a half of those as lead governor.
- Billie Critchlow, carer governor: who has served nine years on the Council of Governors.
- Jonathan Hall, service user Governor: who has served six years on the Council of Governors.

#### **4. Annual members meeting 2025**

A public meeting must be held each year as an annual member meeting before 30 September to receive the final annual report and accounts 2024-2025. The proposed date, for 2025, subject to final confirmation of times and venues is **25 September 2025**.

Consideration is still being given to the time and location of the event. This year we are considering changing the time and venue to a late afternoon to early evening, providing light refreshments and buffet (subject to costs not exceeding the previous year's budget). The hope is that the meeting will encourage staff and public attendance.

A marketplace is planned to take place prior to the formal meeting and stall holders will comprise of invited teams, services, and partners.

#### **5. Well-led review**

The Trust appointed the good governance institute (GGI) to conduct a developmental well-led governance review, and this took place from December 2024 to April 2025, including fieldwork from November 2024 to February 2025.

The insight from the report of findings has provided assurance as well as evidence of areas of improvement. The focused areas of improvement are:

- Cultural improvement and values work
- Improvements to governance arrangements and reducing meetings and duplication
- Revisit the reporting lines of tier 2 groups
- A review of the cycle of business, using the board assurance framework
- To develop report writing skills so they focus on assurance
- Review the membership of Board committee meetings
- Continue to embed freedom to speak up in all that we do
- Focus on equality, inequality, equity, and sustainability
- Embed a learning culture for incidents, complaints, and claims
- Continue to support staff networks so they can thrive

The corporate governance team are using a quality improvement approach to progress this work. Progress is underway to:

- ✓ Values work continues to be rolled out through events, roadshows and publicity.
- ✓ All committee, executive team (EMT) and Board work plans and membership are being reviewed with the executive and non-executive directors, with work on a proposed approach completed by August 2025.

- ✓ Tier 2 groups will be reviewed post August following a GGI review of quality governance and improvements to senior leadership group (SLT) meetings.
- ✓ Report writing training has been developed and rolled out.
- ✓ A report writing checklist has been co-designed with executive assistants to ensure quality reports are checked prior to submission for each directorate.
- ✓ Freedom to speak up campaign is in the process of being finalised and a working group set up quarterly to progress the self-assessment tool and an improvement action plan.
- ✓ Aligning all the strands of equality and equity through a working group with a clear reporting and governance structure is now being finalised.
- ✓ Work to develop case studies to ensure a culture of learning from claims is now in progress and will feature in reports going forward.
- ✓ Staff networks continue to be supported and developed.

## 6. The Modern Anti- Slavery statement 2024-2025

The Modern Anti- Slavery statement, which is produced retrospectively, is presented for comment following receipt at the people committee in July 2025 and is attached at **appendix 4** for Board of director approval for final publication.

## 7. Register of Sealings 2024-2025

As required under the standing orders, a register of sealing is kept by the Trust secretary (managed by the executive assistant to the Chief Executive). The Board of directors is asked to note the use of the Trust Seal report for 2024-2025, which notes that the Trust Seal was used twice during 2024-25 – attached at **appendix 5**. The register has been signed off by the Chair and is presented to the Board of directors for formal noting.

## 8. Board assurance committee annual reports and terms of reference

The assurance committee annual reports for 2024-2025 provide an update on the work which has taken place over the financial year. The reports set out how each committee fulfils the remit and terms of reference. All reports were received at the audit and risk committee in July 2025. Some changes for noting have been made to the terms of reference including to membership/attendees and are attached at **appendix 6** for approval by the Board of directors.

## 9. Recommendations

The Board of directors is asked to:

- **Note** the update provided for declarations of interest and process for confirmation of compliance of the fit and proper persons' test.
- **Note** the update on the Governor elections.
- **Note** the update on the annual members meeting.
- **Note** the update on the GGI well-led review.
- **Approve** the modern anti-slavery statement
- **Note** the use of the Trust seal during 2024-2025.



- **Note** the Board assurance committee annual reports and final assurance committee terms of reference.

**Appendices:**

Appendix 1: register of interests - Board of Directors

Appendix 2 register of interests – Council of governors

Appendix 3: register of interests - staff

Appendix 4: Modern anti-slavery statement

Appendix 5: Register of sealings 2024-2025

Appendix 6: Board assurance committee terms of reference (annual reports available on iBabs and on request)



## Appendix 1: register of interests - Board of directors

<p style="text-align: center;"><b>Board of Directors</b> <b>Register of Interests 2025-26 as of May 2025</b></p>					
Personal details	Details of Declared interest	Identified potential for conflict of interest and action taken by Trust	Date from	Date to	Date registered
Sharon Mays Chair	NHS provider board/ trustee member Director of NHS Providers company Member of the Remuneration Committee for NHS Providers Chair of the South Yorkshire MHLDA provider collaborative board Part of NHS England Chair's Advisory Group Vice-chair of Sheffield Chair's group (Sheffield Health and Care Partnership)  Relative employed by Tees Esk Wear Valley NHS FT in the role head of digital delivery	Non-Financial Professional Non-Financial Professional Non-Financial Professional Non-Financial Professional  Non-Financial Professional Non-Financial Professional	01.07.2023 01.07.2023 01.09.2023 12.07.2023  22.01.2024 16.12.2024	30.06.2026 30.06.2026 ongoing ongoing  ongoing ongoing	13.02.2025
Heather Smith Non-executive director	Director of Food Works Sheffield, a not-for-profit organisation repurposing and redistributing food surplus from retail and producers, promoting food security and sustainability. Advisory and governance roles in a number of private organisations	Non-financial, Personal Financial, profesional	01.03.2020 01.03.2020	ongoing ongoing	27.02.2025
Owen McLellan Non-executive director	Chief Financial Officer at Lookers Ltd	Financial	11.11.2024	ongoing	06.03.2025
Anne Dray Non-executive director	Nothing to declare	N/A	N/A	N/A	03.03.2025
Olayinka Monisola Fadahunsi-Oluwole Non-executive director	Member of the Advisory Group for South Yorkshire Police Race Action Plan Ambassador for the Children's Hospital Charity Sheffield Children Foundation NHS Trust Specialty Doctor in Community Paediatric Sheffield Children's Foundation NHS Trust Member of the Parochial Church Council Christ Church Dore	non-financial, professional non-financial, professional financial, professional non-financila, personal			18.02.2025
Brendan Stone Associate non-executive director	Trustee/ Director Sheffield Flourish Leadership Coach, NCCMH/ NHSE Culture of Care Programme Professor, University of Sheffield	Non-financial, personal  Financial, professional	2010 2024	ongoing ongoing	17.02.2025
Salma Yasmeen Chief Executive	Member of the Board of Thirteen (Thirteen Housing Group) including Remuneration Committee -Charitable Community Benefit Society registered under the Co-operative & Community Benefits Society Act 2014 Advisory Board Member for School of Business, Huddersfield University Spouse employed in Management capacity at Leeds & York Partnership NHS Trust	Non-financial Personal	01.11.2021 01.01.2022 current	ongoing ongoing 31.03.2025	25.03.2025



Phillip Easthope Executive Director of Finance and Digital	Nothing to declare	N/A	N/A	N/A	04.03.2025
James Drury Director of Strategy	Trustee of Sheffield Hospitals Charity, which supports SHSC and STH	Non-Financial Professional Position with SHC declared, and highlighted when appropriate	2024	ongoing	14.02.2025
Caroline Johnson Executive Director of Nursing, professions and quality	Nothing to declare	N/A	N/A	N/A	03.03.2025
Helen Ann Smart Director of Operations (Interim)	Nothing to declare	N/A	N/A	N/A	17.02.2025
Professor Helen Crimlisk Medical Director (interim)	Specialist Advisor (workforce) Royal College of Psychiatrists Associate Director of Teaching School of Medicine and Population Health, University of Sheffield Psychiatry Lead, Faculty of Medicine, Dentistry & Health, University of Sheffield Honorary Professor, Division of Health, University of Sheffield	Non-financial personal interests Non-financial personal interests Non-financial personal interests Non-financial personal interests	2024 2018 2022 2025	ongoing ongoing 2023 ongoing	11.01.2025
Gulnaz Akhtar interim director of performance and delivery	Seconded from NHS England - director of system coordination. Held a variety of different roles in NHSE since 2013.	financial, professional	Dec-23	ongoing	13.03.2025
Caroline Parry Executive director of people	Owner/ directors of Caroline Parry HR consultancy ltd no work undertaken through the company since 2017	Financial	Jul-05	ongoing	17.02.2025

# Appendix 2 - Register of Interests 2025-2026 - Council of Governors June 2025



Sheffield Health  
and Social Care  
NHS Foundation Trust

Name of Governor and Constituency	DOI Date Notified/ Registered	Declaration of Interests	Identified potential for conflict of Interest and action taken by Trust	Date From	Date To
Dr. Alistair Brash (Young Carer) <i>Stepped down May 2025</i>	21/05/25	N/A	N/A	N/A	N/A
James Barlow (Carers Centre Sheffield)	14/03/2025	Sheffield Carers Centre, Data and Information Officer	N/A	2012	Present
Alick Bush (Public SW)	15/04/2025	Employed by SHSC in a variety of roles including clinical psychologist, director of disabilities, clinical director, head of division (PHS). Part time paid consultancy support to the Mid-Atlantic Wellness Institute, Bermuda Hospitals Board	professional	Jan 1987  ongoing	June 2012 Present
Billie Critchlow (Carer)	12/03/2025	Nothing to declare	N/A	N/A	N/A
Chris Digman (Public SE)	15/04/2025	Nothing to declare	N/A	N/A	N/A
Linda Duckenfield (Service User)	13/03/2025	Green Party member	N/A	N/A	N/A
Ben Duke (Public SW)	23/03/2025	Volunteer and/or work for the following organisations: (1) Sheffield MENCAP (2) Re-engage (3) Young Lives vs Cancer (4) Rethink – Expert by Experience sessional worker (5) SACMHA - Sheffield African Caribbean Mental Health Association – Community Research worker (6) Sheffield City Council – Sheffield Directory Adult Social Care	professional	Nov 2018 (1) July 2020 (2) Nov 2018 (3) May 2023 (4) Jan 2024 (5) May 2023(6) April 2023(7) Oct 2024 (8) July 2024 (9) Sep 2023 (10)	Present Present 31 Mar 25 Present Present 31 Aug 24 Present Present  Sep 2024 31 Mar 24 Present

Name of Governor and Constituency	DOI Date Notified/ Registered	Declaration of Interests	Identified potential for conflict of Interest and action taken by Trust	Date From	Date To
		Coproduction Group - sessional worker (7)Sheffield Health and Social Care (SHSC) NHS Foundation Trust Expert by Experience sessional worker (8)Community Attachment Scheme (CAS) tutor in the School of Health and Related Research (university of Sheffield) (9)University of Sheffield, as a Research Assistant (10) Research Assistant at University of Nottingham on a COVID19 Vaccination Programme Research Project (11) Research assistant Sheffield University		July 2024	
Chinyere Ehosiem (Staff – AHP)	12/03/2025	Nothing to declare	N/A	N/A	N/A
Angelito Esquerra (Support Worker)	10/04/2025	Nothing to declare for purposes of this public record	N/A	N/A	N/A
Andrea Fox (Spence) (Appointed – Sheffield University)	17/03/2025	University of Sheffield Allied Health Professions, Nursing & Midwifery Professional Lead for Nursing at the above organisation, with a strategic role in business development	professional	2012(at Sheffield University) Sept 23 (current role)	present
Jonathan Hall (Service User)	12/03/2025	LERP – Lived Experience Research Panel Peer researcher	professional	June 2024	N/A
Celia Jackson-Chambers (SACMHA)					

Name of Governor and Constituency	DOI Date Notified/ Registered	Declaration of Interests	Identified potential for conflict of Interest and action taken by Trust	Date From	Date To
Irfan Khan VCFS (PMC)	18/03/2025	Chair, Pakistani Muslim Centre . Nothing else to declare for purposes of this public record.	professional	N/A	present
Rebecca Lawlor (Service User)	14/04/2025	Nothing to declare	N/A	N/A	N/A
John Malcomson (Service User)					
Chin Maguire (Staff - Central Support)	28/04/2025	Nothing to declare	N/A	N/A	N/A
Kathleen Myrie (Staff- Nursing)	12/03/2025	Nothing to Declare	N/A	N/A	N/A
Julie Marsland (Staff-side)	22/04/2025	Mencap Sheffield	N/A	2017	present
Ross Mallett (Sheffield Hallam University)	16/04/2025	Deputy Head of School: Health & Social Care, Sheffield Hallam University	professional	2015	present
Dave Palfreyman (Public RoE)	12/03/2025	Thinking Through Academy (Leadership Training Programmes) Associate Development Solutions (Bespoke solutions for service and professional development). Spouse volunteers for Chilypep (the Children and Young People's Empowerment Project)	N/A		present
Terry Proudfoot (Service User)	01/05/2025	Member of Labour Party 1992	N/A	1992	present
Dave Swindlehurst (Sheffield MENCAP and Gateway)	13/03/2025	Sheffield Mencap and Gateway Chief Executive officer	N/A	Sept 2016	present
Sophie Thornton (Sheffield City Council)	24/04/2025	City Councillor Deputy Chair Adult Health & Social Care Policy Committee Sheffield Mencap & Gateway – support worker (Activity & Learning Hub service), night lead support	professional	May 2021 May 2023 Nov 2019	present

<b>Name of Governor and Constituency</b>	<b>DOI Date Notified/ Registered</b>	<b>Declaration of Interests</b>	<b>Identified potential for conflict of Interest and action taken by Trust</b>	<b>Date From</b>	<b>Date To</b>
		worker (Gateway service), group leader (Children's services)			
Laura Wiltshire (Public SE)	12/03/2025	RDaSH – Care Group Director Trustee for charity SAYiT	Professional	May 2024 Oct 2023	Present
Mohammed Khawja Ziauddin (Public North East)	29/04/2025	Nothing to Declare	N/A	N/A	N/A

## Appendix 3: register of interests - staff

Employee Name	Role	Details of Declaration	Identified potential for conflict of interest and action taken by Trust	Date from	Date to	Date notified	Public Register
Abayaratne, Dr Dasal Taraka	Specialty Registrar	Sits on the Royal College Psychiatrists Sustainability Committee	Non-financial professional	Sep-20	Present	05/01/2025	Y
Agatha Payne	Trainee Clinical Psychologist	Trustee and Non-executive Director of South Yorkshire Eating Disorder Assosiation	Non Financial	Mar-25	Present	09/04/2025	Y
Algar, Mr. Andrew	Nurse Manager	Nothing to declare	N/A	N/A	N/A	19/12/2024	Y
Ali, Dr Leila Kathryn	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Allen, Miss Phillipa	Speech and Language Therapist	Nothing to declare	N/A	N/A	N/A	21/12/2024	Y
Allinson, Mr. Abiola Abdul-Mojeed	Pharmacist	Lead for accreditation within College of Mental Health Pharmacy - volunteering	Non Financial	Feb-21	Present	14/02/2025	Y
Allsop-Finner, Ms. Helen Marie Elizabeth	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	06/01/2025	Y
Alt, Miss Rachel Helen	Manager	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Asquith, Miss Debra	Counsellor	Private counsellor and supervisor (self employed)	Financial	2017	present	07/05/2025	Y
Atkinson, Mrs. Eleanor May Nestor	Physician Associate	Nothing to declare	N/A	N/A	N/A	18/12/2024	Y
Atter, Dr Michael James	Consultant	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Ayaz, Mr. Easah Mohammed	Physician Associate	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Babiker, Mrs. Jemma Cassandra	Nurse Consultant	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
Badger, Mrs. Michelle Anneka	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Baines, Ms. Rebecca Louise	Psychotherapist	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Barker, Miss Aimee Leane	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	06/01/2025	Y
Barnitt, Mr. Simon Lee	Senior Manager	Director of a limited company -Compassionate Humans Ltd. Consultancy services provided to ImROC (charity) via Compassionate Humans Ltd.	Financial	Oct-23	Present	19/05/2025	Y
Barrett, Mr. Michael Stephen (Mike)	Manager	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Bava, Mrs. Sophia Mazie Caroline	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Bawden, Mrs. Sarah Anne	Senior Manager	Spouse is the director of Mindflick LTD but Sarah has no direct relationship to the contracts	Indirect interest	2016	Present	24/04/2025	Y
Baxter, Miss Tania Louise	Senior Manager	Nothing to declare	N/A	N/A	N/A	20/02/2025	Y
Beart, Dr Suzanne	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Bell, Mr. Nicholas Harvey	Senior Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Bennett, Miss Claire Elizabeth	Applied Psychologist - Clinical	Administration at a business park, coaching horse riding, volunteering for a horse riding charity	Financial	2023	Present	31/12/2024	Y
Bennett, Mr. Joseph Michael	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	13/12/2024	Y
Bennett, Mrs. Amanda Elizabeth	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	18/11/2024	Y
Bent, Miss Alison	Dietitian	Nothing to declare	N/A	N/A	N/A	25/04/2025	Y
Bethel, Dr Nicola Jane	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	20/12/2024	Y
Bilton, Mrs. Deborah	Social Worker	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Bishop, Dr David Stephen	Consultant	Royal College of Psychiatrists – Associate Programme Director, Leadership and Management Fellowship scheme	Professional	May-23	Present	24/12/2024	Y
Bishop, Mrs. Louise	Community Practitioner	Nothing to declare	N/A	N/A	N/A	18/12/2024	Y
Black, Mr. Liam Antony	Physician Associate	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Blewett, Dr Charlotte Lucy	Consultant	Nothing to declare	N/A	N/A	N/A	15/12/2024	Y
Bond, Mrs. Jenni	Senior Manager	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Booker, Mrs. Kerri Donna	Senior Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Boon, Dr Katharine Margaret	Applied Psychologist - Clinical	15 hour contract with SWFT	Financial	2015	Present	28/04/2025	Y
Bowns, Laura	Assistant Contracts Manager	Nothing to declare	N/A	N/A	N/A	12/02/2025	Y
Boyce, Mr. Christopher Jimmy	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	07/02/2025	Y
Bradwell, Dr Alex Joseph Martin	Consultant	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Bramhall, Miss Geena Natalie	Pharmacist	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Brown, Miss Judith Elaine	Nurse Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Buccieri, Miss Francesca	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	06/03/2025	Y
Buck, Miss Judith Helen	Sister or Charge Nurse	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Bunyan, Miss Josephine Rebecca (Josie)	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Burleigh, Mr. Jonathan	Manager	Nothing to declare	N/A	N/A	N/A	14/01/2024	Y
Burns, Mrs. Susan	Nurse Manager	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Bushra, Dr Anika	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	18/12/2024	Y
Butcher, Miss Emma Katharine	Pharmacist	Nothing to declare	N/A	N/A	N/A	08/01/2025	Y
Butterworth, Mrs. Debra Kathryn (Debra)	Manager	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Campbell, Miss Josephine Elizabeth	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Cardak, Mr. Burak	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	12/02/2025	Y
Carey, Mrs. Magdalena Marta	High Intensity Therapist	Self-employment registered with HMRC	Financial	Jan-25	Present	24/04/2025	Y
Caroline Thompson	Wellbeing Practitioner	Private dance company	Financial	Jan-24	Present	01/05/2025	Y
Carter, Mr. Richard William	Psychotherapist	Nothing to declare	N/A	N/A	N/A	27/03/2025	Y
Cartwright, Mr. Ian	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	05/02/2025	Y
Cartwright, Mrs. Nicola	Occupational Therapist	Named person for SHINDIG funds (SHSC service) which is managed by Sheffield hospital charities fund.	Non Financial	May-24	Present	18/02/2025	Y
Casey, Mr. Liam (Liam)	Senior Manager	Nothing to declare	N/A	N/A	N/A	13/02/2025	Y

Caw, Mrs. Jeanette Alison	Psychotherapist	Private practice in which I see clients on Mondays. This is my non-working day for the SHSC Trust.	Financial	Mar-10	Present	27/02/2025	Y
Chaudhry, Dr Sidra Ali	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Cheung-Cook, Ms. Tia	Applied Psychologist - Clinical	Voluntary work with Queen Elizabeth Sixth Form College (Darlington), support reviewing A level psychology course content (clinical modules). Self is not responsible for developing the content, just offering consultation on resources used at present.	Non-financial personal interests	Feb-24	Present	13/12/2024	Y
Chisnall, Miss Samantha Jayne	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	06/01/2025	Y
Clarke, Dr Sally Louise	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Clarke, Dr Zara Jane	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Clarke, Mr. James Ian	Senior Manager	Nothing to declare	N/A	N/A	N/A	20/12/2024	Y
Clifford, Ms. Fiona Jane	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Coan, Dr Anita Chesterton	Specialty Doctor	Gift worth £50 received from patient at end of their care	N/A	Dec-24	Dec-24	31/12/2024	Y
Cockerill, Mr. Andrew	Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Cogill, Mr. Andrew Leonard	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	21/03/2025	Y
Collier, Mrs. Kelly Louise	Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Collin, Dr Sophie Ellen (Sophie)	Applied Psychologist - Clinical	Paid £522.10 to the Early Intervention Service budget for a day of teaching to Clinical Associate Psychologists at the University of Exeter	Financial	May-25	May-25	25/04/2025	Y
Connelly, Mr. Sam Joseph (Sam)	Physician Associate	My father (Mr. Mark Connelly) also works within inpatient services occasionally at SHSC. Unlikely I would be involved in management/recruitment. SHSC already aware of this.	Indirect interest	Feb-20	Present	31/12/2024	Y
Connie Chapman	Counsellor	Off hours private client work (very limited to cover the cost of CPDs); voluntary work for Contemplative Fire and Sheffield Spiritual Accompaniment Network	Non Financial	Jul-05	Present	14/02/2025	Y
Conquer, Mrs. Sally Kaye	Physiotherapist	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Constant Al	Psychosexual Therapist	Work in private practice (psychotherapy) part time	Financial	2020	Present	21/03/2025	Y
Cotton, Mr. Christopher Charles	Senior Manager	Trustee of Sheffield Health International Partnerships (SHIP) which has a connection into Gulu Sheffield partnership within SHSC. My spouse Helen Cotton works as a Deputy Operations Director for Sheffield Children's NHS FT (SCFT) My cousin Steven Cotton is Managing Director of a charity called Grow UK (Young people development), which receives referrals from SHSC	Non- Financial Personal or Indirect Personal Personal	Feb 2024 Feb 2024 Feb 2024	Present Present Present	14/02/2025	Y
Cowhig, Ms. Helen	Manager	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Creaser, Mr. Gregg	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Crimlisk, Dr Helen Lesley	Medical Director	Strategic Lead for Workforce, RCPsych Health Foundation, Q Member, Generation Q Fellow, Sciana Fellow NHS England Advisory Group for 24/7 CMHT Pilot Associate Director Teaching, Faculty of Health, University of Sheffield Advisory Board, NIHR New Roles in Mental Health Research Programme Husband Professor Oliver Bandmann, Sheffield Institute for Translational Neuroscience	Professional Professional Professional Professional Professional Personal	2023 2019 2024 2020 2023 2002	All to present	11/12/2024	Y
Crosby, Ms. Samantha (Sam)	Senior Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Cubitt, Mrs. Holly Emma	Manager	Spouse is Managing Director of Urgo UK supplier of medical devices to NHS	Personal	Oct-22	Present	02/01/2024	Y
Cullen, Mr. Daniel (Dan)	Manager	completing a PhD with the University of Sussex, which was jointly funded by SeNSS, ESRC, and Sussex Partnership NHS Foundation Trust, as part of a SeNSS collaborative studentship that I was successful in securing in 2020. This funding was a full MRes/PhD stipend that has now ceased. I also received research funds during this PhD, known as RTSg, to cover costs of my own research, e.g. pre-registering my research, attending conference.	Financial	2020	2024	27/12/2024	Y
Cunningham, Miss Mishell Dianne (Mishell)	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	24/02/2025	Y
Currie, Mrs. Helen Mary Katherine	Occupational Therapist	I volunteer for Scouts as a Beaver Scout Section Leader	Non-financial	2017	Present	24/04/2025	Y
Czarnecki, Miss Fiona Marie	Manager	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Davies, Miss Angela Marie	Officer	Nothing to declare	N/A	N/A	N/A	19/12/2024	Y
Davis, Miss Laura Leanne	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Davis, Mrs. Stella Elizabeth	Nurse Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Davis, Ms. Susan	Physiotherapist	Nothing to declare	N/A	N/A	N/A	04/03/2025	Y
Dawson, Mr. Samuel Ian	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	29/04/2025	Y
Dembo, Ms. Penelope	Speech and Language Therapist	Nothing to declare	N/A	N/A	N/A	16/12/2024	Y
Devine, Mrs. Angela	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Dickinson, Mrs. Karen Elizabeth	Senior Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Dickinson, Mrs. Toni June	Sister or Charge Nurse	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Dimelow, Dr Edward Philip	Consultant	Nothing to declare	N/A	N/A	N/A	06/01/2025	Y
Dodd, Miss Zoe	Manager	ImROC - self employed, part time hours	Financial	Aug-24	Present	26/03/2025	Y
Doherty, Mr. Anthony	Psychotherapist	Nothing to declare	N/A	N/A	N/A	12/02/2025	Y
Doyle, Mr. Hugh	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Dracas, Mrs. Elizabeth Anne	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	06/01/2025	Y
Duffy, Mr. Daniel Sean	Psychological Wellbeing Practitioner	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Dunfield, Mrs. Rachel Sheila	Psychotherapist	Self-employed therapist (6 hrs per week)	Finacial	2021	Present	25/04/2025	Y



Eaton, Ms. Deborah Louise (Debbie)	Cognitive Behavioural Therapist	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Eckhardt, Miss Adele Patricia	Manager	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Egginton, Mrs. Alison Helen	Manager	Nothing to declare	N/A	N/A	N/A	30/12/2024	Y
Ehosiem, Mrs. Chinyere Ihurulam	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	13/12/2024	Y
Ell, Miss Georgina	Pharmacist	UCL university – visiting lecturer	Financial	2018	Present	14/02/2025	Y
Ellerington, Mrs. Helen Louise	Applied Psychologist - Clinical	Independent travel agent and can book travel with both agent and commissionable rates. I do this for my own personal travel and close family/friends.	Financial	Jan-24	Present	05/02/2025	Y
Ellison, Mrs. Sarah Jane Mary	Manager	Nothing to declare	N/A	N/A	N/A	09/01/2025	Y
Emma Cartledge	Receptionist	Part time work at a supermarket which does not impact her work at SHSC	Non-Financial Personal/Indirect	Sep-24	Present	23/01/2025	Y
Fairbrother, Dr Jennifer Mary	Specialty Doctor	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
Falconer, Mr. Andrew	Sister or Charge Nurse	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Fergusson, Miss Alexandra Danielle	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Ferry, Mrs. Cara Louise	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Fitzgerald, Mr. Barry	Community Nurse	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Flaherty, Dr Jamilla Mariam	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	21/03/2025	Y
Ford, Miss Alice Kate	Pharmacist	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Ford, Mrs. Angela Ritchie	Speech and Language Therapist Specialist Practitioner	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Foster, Mr. Thomas James Leonard	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Fowkes, Ms. Melanie Kate	Community Nurse	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Fox, David	Manager	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Furtado, Dr Jayraj Bosco (Jay)	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Fyffe-Macleod, Dr Ruth	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Gaines, Miss Sarah Louise	Psychotherapist	Nothing to declare	N/A	N/A	N/A	09/01/2025	Y
Galloway, Dr Alexander Khar Leong (Sandy)	Specialty Doctor	Spouse Deborah Waller is a DBT therapist with Specialist Psychotherapy Services (currently on maternity leave)	Indirect interest	Mar-24	Present	31/12/2024	Y
Gann, Dr William John	Consultant	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Gardner, Dr Justin Mark	Specialty Doctor	Nothing to declare	N/A	N/A	N/A	10/01/2025	Y
Garrity, Ms. Vanessa Lorraine (Vanessa)	Other Executive Director	Director of Sociable Angels Ltd however this is not currently trading Volunteer with Rethink Mental Illness Sit on National Editorial Board for Unite Mental Health Nursing Association	Non-Financial	2015	Present	28/04/2025	Y
Gerrard, Mr. Daniel John	Community Nurse	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Gill, Miss Hannah Louise	Speech and Language Therapist	Private work as a consultant for Attuned Psychiatry and Psychology. This is based in London and all work completed is for clients living in London. I complete this work online. It has no impact on my work for SHSC	Professional, Financial	Jul-24	Present	13/01/2025	Y
Glennon, Mr. Marcus James	Psychotherapist	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Goodwin, Mr. Philip (Phil)	Manager	Nothing to declare	N	N/A	N/A	13/12/2024	Y
Goude, Mr. Benjamin Francis	Physician Associate	Nothing to declare	N/A	N/A	N/A	27/02/2025	Y
Gouldbourne, Mrs. Carolyn Lishon Lacy-Ann	Physician Associate	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Gratton, Mrs. Andrea	Manager	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Green, Miss Sarah Elizabeth	Community Nurse	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Green, Mrs. Amber	Accountant	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Greenough, Mrs. Caroline Rowena	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Greig, Mr. Kenneth (Kenny)	Manager	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Griffin, Mrs. Kerry Ann	Nurse Manager	Nothing to declare	N/A	N/A	N/A	13/01/2025	Y
Griffiths, Dr Kelly Anne (Kelly Hobbs)	Applied Psychologist - Clinical	Volunteer at South Yorkshire Chaplaincy and Listening Service NIHR Funding half a day a week funded time from September 2024 – March 2016 Private clinical work	Professional Financial Financial	June 2021 Sept 2024	Present	26/03/2025	Y
Hackney, Mr. Gregory (Greg)	Senior Manager	Nothing to declare	N/A	N/A	N/A	13/12/2024	Y
Hall, Miss Jessica Rebekah	Pharmacist	Nothing to declare	N/A	N/A	N/A	21/03/2025	Y
Hall, Miss Jodie	Occupational Therapist	Director of a dormant company - Antika Stone Ltd Bespoke Design Ltd	Financial	2023	Present	13/12/2024	Y
Harding, Mr. Paul	Manager	Nothing to declare	N/A	N/A	N/A	28/02/2025	Y
Hardwick, Miss Joanna Grace (Jo)	Senior Manager	Nothing to declare	N/A	N/A	N/A	06/01/2025	Y
Harneis, Mr. Benjamin William	Psychotherapist	Nothing to declare	N/A	N/A	N/A	25/03/2025	Y
Harrison, Miss Tanya Rachel	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Harrison, Mr. Henry Kane	Manager	Nothing to declare	N/A	N/A	N/A	24/02/2025	Y
Harrison, Mrs. Lucy Mary	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	25/04/2025	Y
Harrison, Ms. Linda Catherine (Lin)	Psychotherapist	My wife, Ali Bishop, is the Equality Diversity and Inclusion Lead for West Yorkshire ICB	Professional, Non-Financial	Sep-23	Present	16/12/2024	Y
Haswell, Mr. Mark Andrew	Community Practitioner	Nothing to declare	N/A	N/A	N/A	23/12/2024	Y
Hawker, Dr Joanne	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Hawkes, Miss Charlotte Jade	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	08/04/2025	Y
Hazlehurst, Miss Natalie Louise	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Hebblewhite, Miss Naomi	Manager	Nothing to declare	N/A	N/A	N/A	23/03/2025	Y
Heminway, Dr Robert Alexander Christopher	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	11/04/2025	Y

Hemmingfield, Ms. Joanne Marie	Manager	Hemmingfield Consultancy, Trustee of C3 Hope Trust, and working on a book with is not connected to the Trust	Financial	2005	Present	06/05/2025	Y
Hervey, Ms. Petra Ann	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	21/03/2025	Y
Higginbottom, David	Manager	Nothing to declare	N/A	N/A	N/A	07/02/2025	Y
Highfield, Ms. Emma Jane	Nurse Consultant	Tutor for the British Institute of Learning Disabilities and works adhoc for a business called Narrative Therapy	Financial	May-24	Present	07/05/2025	Y
Hillison, Ms. Emily Zelda	Manager	Nothing to declare	N/A	N/A	N/A	03/04/2025	Y
Hobbs, Mr. Martin	Sister or Charge Nurse	School Governor – attending governance and business meetings every 6-8 weeks (5:30 – 7:30). Meeting with OFSTED when needed. Occasional school visit.	Non Financial	Nov-24	Present	17/02/2025	Y
Hockey, Mrs. Sally Jane	Manager	Nothing to declare	N/A	N/A	N/A	19/12/2024	Y
Holland, Mrs. Emma	Director of Nursing	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Holly, Miss Sarah	Psychotherapist	Director of community interest company (CIC) Kaleidoarts for wellbeing using creative arts. I'm involved in developing the social enterprise and programmes as well as running a 10 week art programme.	Financial – running programmes and developing programmes	Jul-21	Present	09/12/2024	Y
Horspool, Miss Michelle Jane	Senior Manager	Numerous research grants are managed through the Research Development Unit – as part of our business as usual and reported through Trust governance processes. All research income/expenditure is managed through the Trust. No personal income received. Honorary Research Fellow contract with The University of Sheffield	Non-financial professional interests	Apr-24	Mar-25	20/12/2024	Y
Howe, Miss Debra (Deb)	Pharmacist	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Howson, Mr. Steven John	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Hughes, Mrs. Rebecca	Sister or Charge Nurse	Nothing to declare	N/A	N/A	N/A	26/02/2025	Y
Hunt, Miss Rosemary Christine Louise (Rosie)	Applied Psychologist - Clinical	I sit on a committee in a church which gives grants to local voluntary organisations. During 2024, one of the grants we donated to was a small project run by GP surgeries in the Foundry PCN network. (they give small grants to patients in urgent need – eg. bus fare to a food bank, emergency utilities, fleeing domestic violence). It isn't linked to my role as a psychologist at all.	Financial	Nov-24	Present	02/01/2025	Y
Hunter, Miss Kira Suzanne	Physiotherapist	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Hunter, Mrs. Katie Louise	Manager	Nothing to declare	N/A	N/A	N/A	17/12/2024	Y
Hutchison, Dr Andrew John	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Isebor, Mr. Peter	Applied Psychologist - Clinical	Has a private company - Inimba Ltd	Financial	2021	Present	29/04/2025	Y
Isherwood, Dr Tomas Mathew (Tom)	Applied Psychologist - Clinical	Permanent contract with University of Leeds Clinical Psychology Training Programme Admissions Director, Deputy Clinical Director 0.6 WTE Permanent contract with Leeds Teaching Hospitals NHS Trust, Manager, Principal Clinical Psychologist 0.3 WTE	Professional	2003 2023	Present	10/01/2025	Y
Ismay, Mr. Roderick Mark	Accountant	Trustee (PCC Member) of All Saints Ecclesall church in Sheffield.	Non-financial personal interests	Apr-16	Present	31/12/2024	Y
Jack, Dr Jenny Frances	Consultant	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
Jacques, Mr. Simon Thomas	Psychotherapist	Nothing to declare	N/A	N/A	N/A	30/04/2025	Y
Jaouhar, Ms. Houda	High Intensity Therapist	Bank position at SHSC	Financial	2024	Mar-25	07/02/2025	Y
Jarman, Dr Maria Jane	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	31/01/2025	Y
Jenkin, Mrs. Amy	Nurse Manager	accepted onto an NIHR research training program, for which the service will receive back pay for my time.	Financial	Jan-25	Oct-25	02/01/2025	Y
Jepson, Miss Claire Louise	Occupational Therapist	I am one of the signatories for the SHINDIG budget which is held by Sheffield Hospitals Charity.	Non Financial	2019	Present	14/01/2025	Y
Jessop, Mrs. Maria Louise	Manager	Nothing to declare	N/A	N/A	N/A	20/12/2024	Y
Johnson, Dr Caroline	Director of Nursing	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Johnson, Dr Holly Marie	Applied Psychologist - Clinical	I operate a small private practice offering psychological interventions on my non-working day. Please see declaration of outside employment form.	Financial	Apr-22	Present	28/04/2025	Y
Johnson, Miss Abbi	Manager	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Johnson, Miss Sian Eve	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Johnson, Mr. Ian	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	06/02/2025	Y
Johnson, Mrs. Elizabeth Ruth (Libby)	Dietitian	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Johnson, Mrs. Elizabeth Anne	Senior Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Jonas, Mr. Philip Sean	Officer	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Jones, Miss Amanda	Multi Therapist Manager	Occasional work as an OT (Occupational Therapist) Specialist Advisor (SPA) to the Care Quality Commission.	Financial	2014	Present	02/05/2025	Y
Karna, Dr Bhavana	Consultant	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Kauseni, Mrs. Faith Mutamenji	Pharmacist	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Kavanagh, Mrs. Ellen Marie	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	17/12/2024	Y
Kay, Mrs. Deborah Jane	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	05/02/2025	Y
Kennedy, Miss Laura	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Khamis-Burtoft, Mrs. Karen Marie	Occupational Therapist Manager	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y

Khan, Dr Shahid	Consultant	Private Ltd Company (Khan Private Ltd) for Section 12 work. I work less than full-time and carry out Mental Health Act (Approved Clinician) work outside of my contractual duties on behalf of my Ltd company.	Financial	Feb-24	Present	30/12/2024	Y
King, Mr. Robert William	Psychotherapist	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Kirby, Mrs. Sally	Pharmacist	Nothing to declare	N/A	N/A	N/A	06/01/2025	Y
Kiyori, Mr. Jean Appolinaire	Manager	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Knight, Mr. William Paul	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Kremer, Mr. Michael David	Psychotherapist	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Kwan, Dr Zoe Suet Yee	Consultant	Nothing to declare	N/A	N/A	N/A	13/12/2024	Y
Lambert, Mrs. Amy Elizabeth	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	20/01/2025	Y
Lange, Ms. Gerke Heide	Manager	Nothing to declare	N/A	N/A	N/A	25/04/2025	Y
Langthorne, Miss Diane Paula	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Lawson, Mrs. Shirley	Staff Nurse	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Leahy, Ms. Moira	Applied Psychologist - Clinical	NIHR Grant – SCEPTRE research programme	Financial	Feb-20	Jan-26	18/12/2024	Y
Lee, Mrs. Stefanie Elisabeth	Nurse Manager	Nothing to declare	N/A	N/A	N/A	07/02/2025	Y
Lewin, Mr. Vincent Gerald (Vin)	Senior Manager	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Li, Mrs. Ksenia (Xenia)	Officer	Nothing to declare	N/A	N/A	N/A	18/12/2024	Y
Lidster, Anna	Clinical Assistant	Chair of Governors at Wickersley School and Sports college, part of Wickersley Partnership Trust Rotherham.	Non Financial	Apr-20	Present	20/05/2025	Y
Lilley, Mrs. Gemma Ann	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	08/01/2025	Y
Litten, Miss Hester Kay	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Little, Miss Julie	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	20/12/2024	Y
Littlewood, Dr Claire (Claire)	Consultant	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Lloyd, Miss Philippa Minnie	Psychological Wellbeing Practitioner	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Ludford, Mr. Chris	Nurse Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Ludlam, Dr Michael Julian	Consultant	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
MacDonald, Miss Bridie Rose	High Intensity Therapist	Provided Sheffield University with CBT Training	Financial	Mar-25	Present	31/03/2025	Y
MacDonnell, Dr Joseph Patrick	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	18/12/2024	Y
Maguire, Ms. Chin Chintamani	Manager	Nothing to declare	N/A	N/A	N/A	16/01/2025	Y
Malone, Mrs. Chu Wan Lee (Rebecca)	Clerical Worker	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Manning, Dr Dean Michael	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	31/03/2025	Y
Mantle, Dr Laura Joy	Applied Psychologist - Clinical	Provision of psychological therapy in a self-employed capacity.	Financial	2018	Present	05/02/2025	Y
Mapplebeck, Dr Clare	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Marquez, Miss Marin Jasmine Galicia (Marin)	Physician Associate	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Marshall, Mrs. Fiona Rosalind	Art Therapist	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Marsh-Picksley, Dr Sophie	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Mayfield, Mrs. Amy	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Mayo, Miss Bethan Hope	Sister or Charge Nurse	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Mayor, Miss Rebecca Jane	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
McCabe, Mr. Curtis Terry	Psychotherapist	Affiliate work providing CBT for IESO (private employment/practice)	Financial	2018	Present	29/04/2025	Y
McCarthy, Mr. Darren John	Staff Nurse	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
McCormack, Dr Hannah Louise	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	24/12/2024	Y
McFarland, Dr Robert Graham	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
Mckenzie, Dr Stefan Thewlis	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	27/03/2025	Y
McLennan, Mr. Neil	Manager	Nothing to declare	N/A	N/A	N/A	05/01/2025	Y
Methven-Allen, Mrs. Emma Louise	Psychotherapist	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Miller, Mr. Tom	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Miller, Ms. Juliet Denise	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Millington, Miss Jodie Ann	Senior Manager	Nothing to declare	N/A	N/A	N/A	13/12/2024	Y
Mir, Dr Nusrat Ullah	Consultant	Director of Peak Medicolegal Services Ltd (Private Ltd company)	Financial	Apr-19	Present	11/12/2024	Y
Mitchell, Dr Jonathan Stephen	Consultant	Expert faculty member – NICE Mental Health Suite	Non Financial	2016	Present	25/02/2025	Y
Mitchell, Jordon	Officer	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Moerman, Mrs. Shrewti Ashwin Arend	Pharmacist	Paid day lectures for UCL	Financial	Jan-25	Jan-25	05/02/2025	Y
Moncrieff, Miss Alice Brooks (Alice Moncrieff)	Manager	Nothing to declare	N/A	N/A	N/A	06/02/2025	Y
Moore, Mr. Harry Richard	Pharmacist	Nothing to declare	N/A	N/A	N/A	14/01/2025	Y
Moore, Mrs. Carol Mavis	Community Practitioner	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Mordekar, Dr Aparna Santosh	Consultant	Nothing to declare	N/A	N/A	N/A	27/12/2024	Y
Morrall, Miss Andrea	Community Nurse	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Morton, Mrs. Jennifer Kate	Officer	TRAIN TICKETS TO ATTEND Q EXCHANGE EVENT. THE HOST REIMBURSED TRAVEL COSTS	Financial	Sep-24	Sep-24	19/12/2024	Y
Mould, Miss Alicia Ellen Joy	Speech and Language Therapist Specialist Practitioner	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Mounsey, Mrs. Janine Margaret	Physiotherapist	The role is as an Integrative Counsellor in private practice, seeing approx. 2-6 clients weekly	Financial	Jan-24	Present	17/04/2025	Y
Mousa, Miss Saafi Radwo Haroun	Applied Psychologist - Clinical	Co-director of Beyond Bias Psychological Services Ltd	Financial	Mar-22	Present	22/01/2025	Y
Mullaney, Mrs. Sarah Louise	Manager	Nothing to declare	N/A	N/A	N/A	31/03/2025	Y

Muneer, Mr. Yasir	Manager	Parent Governor at child's nursery Aughton Early Years Centre	Non-Financial Personal/Indirect	Jan-25	Present	03/02/2025	Y
Munemo, Mrs. Florence (Florence)	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Murphy, Ms. Sarah	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Muthiah, Miss Dushka	Psychotherapist	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Myrie, Ms. Kathleen Elaine (Kat)	Sister or Charge Nurse	Nothing to declare	N/A	N/A	N/A	13/12/2024	Y
Naylor-Hill, Dr Harriet	Specialty Doctor	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Newton, Dr Lisa Diane	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	01/04/2025	Y
Newton, Mr. Jack Oliver	Manager	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Newton, Mr. Samuel Mark Edward	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Noble, Mrs. Rachel Heather	Nurse Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Noor, Miss Mehwish	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Norton, Ms. Jessica Louise	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	18/12/2024	Y
Nunns, Dr Samantha	Trust Grade Doctor or Dentist - Specialty Registrar	Nothing to declare	N/A	N/A	N/A	07/02/2025	Y
Nwigwe, Dr Charlotte	Specialty Doctor	Ad hoc shifts in Manchester and section 12 assessments	Financial	2024	Present	24/04/2025	Y
O'Connell, Miss Hannah Elizabeth	Speech and Language Therapist	Freelance associate with The PSC (Public Service Consultants) who are responsible for delivering part of NHS England's Culture of Care improvement project	Financial	May-24	Present	29/04/2025	Y
O'Connor, Mr. Christopher John	Psychotherapist	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Oldfield, Mr. Michael Andrew	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Onyekwelu, Dr Nkiruka	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	30/04/2025	Y
Osborne, Miss Kate	Psychotherapist	Nothing to declare	N/A	N/A	N/A	21/03/2025	Y
Owen, Mr. Ryan Anthony	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Oyegbile, Miss Faith Damilola	Community Practitioner	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Palfreeman, Mr. Brian Paul (Paul)	Manager	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Papailiou, Miss Olivia	Practitioner	Cavendish Cancer Care paid, max.4 hours per week. 1 hour of private psychotherapy per week with client that does not live locally and is not employed by SHSC.	Financial	2024	Present	05/05/2025	Y
Parker, Mr. Mark Paul	Manager	Nothing to declare	N/A	N/A	N/A	30/12/2024	Y
Parker, Mrs. Kimberley Anne	Staff Nurse	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
Parsons, Ms. Ellie Josephine	High Intensity Therapist	Self employed CBT therapist no more than 2 hs per week on non working days	Financial	2024	Present	06/05/2025	Y
Pavlovic, Dr Aleksandar Mido (Alex)	Consultant	Private Therapy Clinic Work	Financial	2024	Present	24/03/2025	Y
Pawar, Dr Ajaykumar Vishwasrao	Consultant	Second opinion appointed doctor through the CQC - this is a paid position on a case by case basis. Voluntary work – patient assessor for Skanda Vale Hospice – A charity	Professional	2010	Present	04/01/2025	Y
Pearson, Dawn	Associate Director of Communications & Corp Gov	Nothing to declare	N/A	N/A	N/A	01/05/2025	Y
Pearson, Dr Abigail	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Pemberton, Ms. Kate	Applied Psychologist - Clinical	Sheffield CBT Practice part time work outside of core SHSC hours	Financial	2017	Present	05/02/2025	Y
Perera, Miss Ciara Margaret	Social Worker	Volunteer work at a food bank (Trussel Trust) within Sheffield, no responsibilities held within volunteer role.	Non-Financial Personal/Indirect	Sep-23	Present	27/01/2025	Y
Pettinger, Dr Rachel	Clinical Medical Officer (Closed to new entrants)	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Pindiprolu, Dr Venkatakirana	Consultant	Named as Director of two property limited companies, namely KSPP Property Limited and RAAP Property Limited	Financial	May-22	Present	28/03/2025	Y
Plant, Miss Kaitlin Hope	Finance Director	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Porter-Young, Dr Francesca Mary	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	21/03/2025	Y
Powell, Mr. Andrew John	High Intensity Therapist	I also do private CBT work. Currently I have 3 clients whom I see intermittently and not on a regular basis because of their work commitments. I have only started working there since September 2024.	Financial	Sep-24	Present	25/03/2025	Y
Powis, Dr Jonathan Andrew	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	16/12/2024	Y
Prescott, Mrs. Donna Louise	Officer	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Priddy, Ms. Joanna Louise	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	30/12/2024	Y
Pullan, Dr Stephanie Fern (Stephanie Roebuck)	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Raha, Dr Anirban	Specialty Doctor	Nothing to declare	N	N/A	N/A	05/02/2025	Y
Raven Nielsen	Employment Advisor	Self employed life coach & registered sole trader	Financial	Jun-24	Present	05/02/2025	Y
Raw, Mrs. Anne	Clerical Worker	Nothing to declare	N/A	N/A	N/A	30/12/2024	Y
Revell, Miss Karla Jade	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Reynolds, Mr. Christopher Peter (Chris)	Chief Information Officer	Nothing to declare	N/A	N/A	N/A	25/04/2025	Y
Rice, Mrs. Julie Ann	Manager	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Ridley, Ms. Cath	Practitioner	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Riley, Mrs. Jennifer Alice (Jenni)	Manager	Nothing to declare	N/A	N/A	N/A	24/02/2025	Y
Roberts, Miss Rebecca Elizabeth	Nurse - Advanced Practitioner	Volunteer position with an academy advisory council which has no links to the Trust	Non-Financial Personal/Indirect	2017	Present	04/02/2025	Y
Roberts, Ms. Helen Vernon	Analyst	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Robinson, Mr. Simon James Andrew	Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Rogers, Dr Michael Douglas	Specialty Doctor	Nothing to declare	N/A	N/A	N/A	31/03/2025	Y

Rogers, Ms. Kirsty	Community Practitioner	Nothing to declare	N/A	N/A	N/A	05/02/2025	Y
Roper-Bowen, Mr. Adam King	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	26/02/2025	Y
Ross, Reverend Sally Helen	Chaplain	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Round, Ms. Catherine Lucy (Gray)	Music Therapist	I work 2 days a week as a self employed Cognitive Behavioural Psychotherapist. I have a small practice and work out of a private therapy centre	Financial	2016	Present	02/05/2025	Y
Rowett, Mrs. Adele Victoria	Senior Manager	Nothing to declare	N/A	N/A	N/A	16/12/2024	Y
Rowlands, Mr. Jason Anthony	Senior Manager	Nothing to declare	N/A	N/A	N/A	16/12/2024	Y
Sadiq, Miss Jozia	Psychotherapist	Nothing to declare	N/A	N/A	N/A	03/01/2025	Y
Sarah Moore	Cognitive Behavioural Therapist	Nothing to declare	N/A	N/A	N/A	10/01/2025	Y
Sargeant, Mr. Stephen (Stephen)	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	25/04/2025	Y
Scott, Dr Shonagh Rachel Hunter	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	24/12/2024	Y
Scott, Mr. Christopher (Chris)	Manager	Nothing to declare	N/A	N/A	N/A	25/03/2025	Y
Seacome, Mrs. Joanna Sarah	Psychotherapist	Nothing to declare	N/A	N/A	N/A	26/02/2025	Y
Selwood, Mr. Jordan Paul Antony	Specialist Nurse Practitioner	Named director of 'The Grey Eye Group Ltd' (previously Grey Eye Surveillance & Investigation Ltd).	Financial	Aug-24	Present	09/04/2025	Y
Sessions, Dr Joanna Mary (Jo)	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	09/04/2025	Y
Seth, Ms. Joanna	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Seville, Miss Emily Elizabeth	Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Shaikh, Dr Gazala (Gazala)	Specialty Doctor	Nothing to declare	N/A	N/A	N/A	23/12/2024	Y
Sharrock, Miss Alex Sarah Louise	Social Worker	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Shaw, Dr Elizabeth Anna	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Sheila Mudadi-Billings	IAPT Consellor	Self Employed Counsellor	Financial	2024	Present	04/04/2025	Y
Shetty, Dr Abhijeeth Rajeeva	Consultant	Nothing to declare	N/A	N/A	N/A	30/01/2025	Y
Short, Mrs. Mary Beth	Community Nurse	Nothing to declare	N/A	N/A	N/A	06/04/2025	Y
Shujaath Ali, Dr Zubaida Sultana Sultana	Specialty Doctor	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Shulyak, Mrs. Eve Charlotte	Speech and Language Therapist	Nothing to declare	N/A	N/A	N/A	27/12/2024	Y
Sibeko, Mrs. Zoe	Manager	Nothing to declare	N/A	N/A	N/A	13/12/2024	Y
Sidhu, Dr Nittu	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
Simmons, Mr. Kevin Alexander	Counsellor	Visiting Lecturer/ supervisor at University of Leeds Wife works as Clinical Lead for Redsolve, Derbyshire Community NHS Trust	Financial Personal	Sept 2023 2017	Present	06/02/2025	Y
Sims, Mrs. Joanne	Nurse Manager	Nothing to declare	N/A	N/A	N/A	30/04/2025	Y
Sinclair Emerson, Miss Rosa	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Singleton, Ms. Jillian Grace	Community Nurse	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Smalley, Mrs. Julie	Nurse Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Smallshaw, Mr. Christopher Paul	Physiotherapist	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Smith, Dr Charlotte Emily	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Smith, Miss Madeline Rose	Nurse Manager	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Smith, Mrs. Alexandra Claire (Alix)	Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Spink, Mrs. Rachel Anna	Physiotherapist	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Staniland, Mrs. Carrie Ann	Officer	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Statham, Ms. Maxine Helena	Manager	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Stephenson, Mr. Charlie James	Adviser	Nothing to declare	N/A	N/A	N/A	16/12/2024	Y
Stewart, Miss Kimberley Jane	High Intensity Therapist	HelloSelf receive referrals from some NHS trusts.	Financial	Jun-24	Present	30/04/2025	Y
Stewart, Mr. Peter Robert	Nurse Manager	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Stockwell, Mr. Richard	Manager	Nothing to declare	N/A	N/A	N/A	30/04/2025	Y
Stone, Miss Helen-Claire	Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Street, Mrs. Katherine Sally (Katie)	Occupational Therapy Specialist Practitioner	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Styring, Dr Nicola Jayne	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	15/01/2025	Y
Suddrick, Mrs. Rachel	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Sullivan, Mr. David Ian	Senior Manager	Nothing to declare	N/A	N/A	N/A	11/12/2024	Y
Sutherland, James	Integrated Change Programme Director	Employed 1 day per week by NHS England as National Specialist Advisor – Community Mental Health Transformation Membership of advisory groups: ADASS (Social Care Advisory Group) My partner is a salaried GP at Porterbrook Medical Centre 1 day per week. My partner works 1 day per week for NHS England's North East & Yorkshire Regional Team. My partner is the Independent Chair of Bradford Adults Safeguarding Board (2 days per week) My partner is a supplier of services to SHSC.	Financial Non Financial Indirect	Jan 2022 Nov 2020 2019 2024 2023 2023	Present	14/04/2025	Y
Sutherland, Mrs. Amanda Jayne	Community Practitioner	Nothing to declare	N/A	N/A	N/A	25/04/2025	Y
Swann, Ms. Wendy Jane	Manager	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Tait, Mr. Alistair David	Pharmacist	Nothing to declare	N/A	N/A	N/A	20/02/2025	Y

Taylor, Dr Matthew John	Specialty Registrar	NHS Topol Digital Fellowship. £15,000 bursary from Health Innovation Wessex to support the development of a digital innovation project of my own design. Being completed through an unpaid role with RDaSH as an Honorary Research Fellow.	Financial	Mar-25	Present	15/04/2025	Y
Taylor, Mr. Michael (Mick)	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Taylor, Mrs. Hayley Marie	Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Thaker, Dr Priya	Consultant	Nothing to declare	N/A	N/A	N/A	21/03/2025	Y
Thomlinson, Dr Rebecca Joanne	Specialty Doctor	Royal College of Psychiatrists, Specialty Doctor Representative for Trent region	Non Financial	2023	Present	21/03/2025	Y
Thompson, Ms. Elissa Rosina Anne	Manager	Honorary Research Assistant at Sheffield University PhD Student, City St Georges University of London	Non- Financial Personal	April 2024 Oct 2021	Present	12/01/2025	Y
Tidy, Dr Jennifer Kathryn	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	28/04/2025	Y
Tissington, Mrs. Kim Lorraine	Nurse Manager	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Torr, Mrs. Leanne	Modern Matron	Nothing to declare	N/A	N/A	N/A	05/02/2025	Y
Tully, Dr Daniel	Consultant	Nothing to declare	N/A	N/A	N/A	24/03/2025	Y
Tuohy, Mr. Stephen	Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Turnbull, Miss Louise Kristian	Community Practitioner	Nothing to declare	N/A	N/A	N/A	16/01/2025	Y
Ulrich, Dr Daniel James	Applied Psychologist - Health	Nothing to declare	N/A	N/A	N/A	27/05/2025	Y
Uprichard, Mrs. Steffi Lorraine	Nurse Manager	Nothing to declare	N/A	N/A	N/A	07/01/2025	Y
Uter, Ms. Margaret	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	26/02/2025	Y
Vadali, Dr Yamini	Specialty Doctor	Nothing to declare	N/A	N/A	N/A	02/01/2025	Y
Venkateswaran, Dr Prithvi	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	25/04/2025	Y
Vogt, Dr William (Will)	Applied Psychologist - Clinical	Hospitality received to pay for travel and accommodation for the Compass Pathways investigators meeting in Prague in my role as a research therapist on the Compass trial Flights: £388.63 Hotel: £142.35 Food/drink: £81.31	Financial	Jan-25	Jan-25	28/02/2025	Y
Walker, Mrs. Rachel Leigh	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Walwyn, Dr Rosemary Emma (Walwyn)	Specialty Doctor	work 2 days a week for a company called functional nexus as a functional medicine doctor.	Financial	Mar-24	Present	14/04/2025	Y
Wan-Ching-Yee, Mr. Chy Khim (Peter Yee)	Specialist Nurse Practitioner	Nothing to declare	N/A	N/A	N/A	25/02/2025	Y
Ward, Dr Kirsty Louise	Specialty Registrar	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Ward, Dr Max Oliver (Max)	Applied Psychologist - Forensic	Partner is a GP with Devonshire Green and Hanover Medical Centre.	Personal	May-24	Present	23/12/2024	Y
Ward, Miss Sharon Ann	Nurse Manager	Nothing to declare	N/A	N/A	N/A	06/02/2025	Y
Wasnidge, Mrs. Dawn Elizabeth	Applied Psychologist - Clinical	Ad hoc teaching at Academy Space Sheffield – 2 hour slots, up to 4 times a year	Financial	2022	Present	28/04/2025	Y
Watson, Mrs. Nicola Faye	Occupational Therapist	Nothing to declare	N/A	N/A	N/A	06/02/2025	Y
Wattton, Mrs. Hannah Lucy	Occupational Therapist Manager	Nothing to declare	N/A	N/A	N/A	17/12/2024	Y
Webster, Jacqueline	Clerical Worker	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
West, Mrs. Catherine Nicola	Psychotherapist	Nothing to declare	N/A	N/A	N/A	25/03/2025	Y
Wheatley, Mr. Simon Peter	Officer	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
White, Mrs. Verity Louise	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Whiteley, Mrs. Amy	Nurse - Advanced Practitioner	Nothing to declare	N/A	N/A	N/A	17/01/2025	Y
Whiteley, Mrs. Angela Joy	Staff Nurse	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Whittaker, Dr Sara	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	23/12/2024	Y
Wiffen, Mr. Sandy (Sid Wiffen)	Nurse Manager	Nothing to declare	N/A	N/A	N/A	20/12/2024	Y
Wilcock, Stephanie	Personal Assistant	Typing of medical legal reports for Plastic Surgeons to the Courts. Continuous employment on a self employed basis started back in 2006 to the present day.	Financial	2006	Present	02/05/2025	Y
Wild, Mrs. Amber	Senior Manager	Nothing to declare	N/A	N/A	N/A	31/12/2024	Y
Wilkinson, Mrs. Sarah Elizabeth	High Intensity Therapist	I am a director and shareholder in the company SE Wilkinson Limited	Financial	2022	Present	14/02/2025	Y
Wilkinson, Ms. Linda Okonkwo (Linda)	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Williams, Mrs. Susan Adelaide	Community Practitioner	Nothing to declare	N/A	N/A	N/A	04/02/2025	Y
Wilson, Miss Jennifer (Jennie)	Officer	Part time Band 2 position at STH	Financial	Jan-21	Present	23/12/2024	Y
Wolstenholme, Mr. John	Manager	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y
Wood, Dr Sarah	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	09/04/2025	Y
Woodland, Lydia	Music Therapist	Nothing to declare	N/A	N/A	N/A	23/01/2025	Y
Wray, Miss Sian	Manager	Nothing to declare	N/A	N/A	N/A	24/04/2025	Y
Wright, Mr. Damion	High Intensity Therapist	Nothing to declare	N/A	N/A	N/A	29/04/2025	Y
Wright, Mrs. Fiona Mary	Manager	Nothing to declare	N/A	N/A	N/A	03/02/2025	Y
Wyatt, Miss Lucy	Social Worker	Involvement with Anna Freud – a mental health charity. I provide supervision for trainees on their SCM courses. This work is paid but this payment goes directly to SHSC as it is part of my job role and I do not benefit financially personally.	Financial	Nov-22	Present	31/12/2024	Y
Youle, Mrs. Lisa Marie	Manager	Nothing to declare	N/A	N/A	N/A	17/12/2024	Y
Young, Mr. Alex David	Applied Psychologist - Clinical	Nothing to declare	N/A	N/A	N/A	13/02/2025	Y
Zhang, Mrs. Meryem	Pharmacist	Nothing to declare	N/A	N/A	N/A	12/12/2024	Y

## **Appendix 4 - Modern anti-Slavery and Human Trafficking Statement for the financial year ending 31 March 2025**

### **1. Statement**

This statement is made in pursuant to section 54 of the Modern Slavery Act 2015 and sets out the steps that Sheffield Health and Social Care NHS Foundation Trust has taken and continues to take to ensure that modern slavery or human trafficking is not taking place within our business or supply chain.

The definition for offences covered by the Modern Slavery Act 2015 can be found by clicking [here](#).

The Trust take a zero-tolerance approach to Modern Slavery and Human Trafficking and have taken several steps to ensure that it does not take place in any part of our supply chains and within our own business.

Any identified concerns regarding Modern Slavery and Human Trafficking are escalated as part of the organisational safeguarding process working in conjunction with our partner agencies.

### **2. Action taken**

Set out below is the action that has been taken in accordance with the Home Office statutory guidance:

#### **a) The organisation's structure, its business and its supply chains.**

- Adhering to the National NHS Employment Checks / Standards (This includes employees' UK address, right to work in the UK and suitable references).
- Continuing to follow the NHS Agenda for Change terms and conditions to ensure that staff receive fair pay rates and contractual terms.
- Ensuring that Agency staff are procured through approved frameworks and put internal systems in place to check that appropriate pre-employment clearance has been obtained for agency staff.
- Ensuring that international recruitment takes place under the Code of Practice for International Recruitment (updated March 2023) and the Code of Practice for the international recruitment of health and social care personnel in England – Gov.UK ([www.gov.uk](http://www.gov.uk))

#### **b) Policies in relation to slavery and human trafficking**

Maintaining our policies and systems of reporting concerns include:

- Freedom to speak up (FTSUG)
- Whistleblowing policy
- Safeguarding policy
- Volunteering process and approach
- International recruitment process and approach
- Procurement process and approach

#### **c) Due diligence processes in relation to slavery and human trafficking in its business and supply chains**

- Continuing to review all safeguarding referrals via the Electronic Patient Record (RiO) and incident reporting system (Ulysses) and sharing data at our safeguarding assurance committee.
- Continuing to provide assurance from the corporate safeguarding team internally to the safeguarding assurance committee, quality assurance committee (QAC) as well as the Board of Directors.
- External assurance via Sheffield children and adults safeguarding partnerships and



through implementation of the safeguarding adult policy and South Yorkshire safeguarding adults and children procedure.

- Work takes place in collaboration with multi-agency partners in South Yorkshire by ensuring that the Trust are represented on relevant committees and sub-groups.
- Continued work in partnership with sector partners on the approach to international recruitment.

**d) The parts of its business and supply chains where there is a risk of slavery and human trafficking taking place, and the steps it has taken to assess and manage that risk and e) its effectiveness in ensuring that slavery and human trafficking is not taking place in its business or supply chains, measured against such performance indicators as it considers appropriate**

The Trust can demonstrate compliance because of the following arrangements that are in place. These are set out below:

- The Trust continue to build long-standing relationships with suppliers, making clear expectations of business behaviour.
- Ensuring the supply chain that most purchases utilise existing supply contracts or frameworks which have been negotiated under the NHS standard terms and conditions of contract. These include a requirement for suppliers to have modern slavery and human trafficking policies and procedures in place.
- By maintaining professional practices relating to procurement and supply and ensuring that procurement staff attend regular training on changes to procurement legislation.
- All suppliers are requested to confirm their compliance with the provisions of the Modern Slavery Act (2015), through agreement of purchase orders and tender specifications.
- As above by participating in multi-agency partnerships such as Sheffield adult safeguarding partnership and its associated sub-groups South Yorkshire safeguarding adult procedures, including links to the referral process for adults at risk in our safeguarding adult's policy.
- Work in partnership with statutory and voluntary agencies across the Integrated Care System who lead on this agenda in South Yorkshire and who are represented at relevant groups.

It is worth noting that as an NHS organisation, we are not designated first responder. Only organisations listed as designated first responders can make referrals to the National Referral Mechanism (NRM).

The list of organisations who can refer are listed on the link below. This means if Trust staff have a concern about a person being subject to Modern Slavery, the Trust have a responsibility to complete a safeguarding concern and refer to the Local Authority requesting that they report to the NRM.

The Duty to Notify is also only for first responders but can be used when an adult does not consent. Further information can be found here:

<https://www.gov.uk/government/publications/human-trafficking-victims-referral-and-assessment-forms/guidance-on-the-national-referral-mechanism-for-potential-adult-victims-of-modern-slavery-england-and-wales>

**f) The training about slavery and human trafficking available to its staff**

- Modern slavery and human trafficking training is embedded within the Trust Level 3 safeguarding adult training. In addition, additional training is available via the Sheffield Adult Safeguarding Partnership.

### **3. Recommendations**

The committee are asked to:

- Agree the annual statement for 2024 – 25 prior to approval at the Board of Directors in July 2025.



## Appendix 5 - Register of Sealings 2024-25

Register Entry No.	Date Signed / Sealed	Item	Signed by
0220	11.09.2024	Units 1 and 2, Shepcote Lane, Counterpart Lease - Phillip Easthope, Executive Director of Finance	Phillip Easthope, Executive Director of Finance
0221	19.12.2024	Deed of Variation Contract Fulwood House	Phillip Easthope, Executive Director of Finance and Salma Yasmeen, Chief Executive



# Terms of Reference

Document History:	
Version Number:	<del>5.1-6</del>
Approved by:	<del>Trust Board</del> <u>Board of Directors</u>
Date approved:	24 July 2024

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Name of Committee	<b>Audit and Risk Committee</b>
Type of Committee	Board Assurance Committee reporting to Board of Directors (the "Board")

1.	<b>Purpose of Committee</b> <p>The Audit &amp; Risk Committee ("the Committee") has been established to provide assurance to the Board of Directors in consultation with the other Board Committees that adequate and appropriate governance structures, processes and controls are in place throughout the Trust.</p> <p>In carrying out this function, the Committee will primarily use the work of internal audit and other assurance functions but will not be limited to these functions. It will also seek reports and assurances from directors and managers as appropriate.</p> <p>The Committee may request and review reports and assurances (positive or negative) from directors and managers on the overall arrangements for governance and risk management.</p> <p>The Committee shall provide assurance to the Board on the probity of the Trust and support the other Board Committees in the achievement of clinical effectiveness and safe outcomes for service users, maintaining positive service users and carer experience and equality and inclusion.</p>
2.	<b>Scope</b> <p>The scope of the committee is Trust wide, it will:</p> <ul style="list-style-type: none"><li>• monitor the integrity of the financial statements, assisting the Board of Directors in its oversight of risk management and the effectiveness of internal control, oversight of compliance with corporate governance standards and matters relating to the external and internal audit functions. This will include overseeing and monitoring arrangements for Digital and Security Management, Policy Governance and Risk Oversight which are supported by groups reporting into the Committee.</li><li>• provide the Board of Directors with a means of independent and objective review of financial and corporate governance, assurance processes and risk management across the whole of the Foundation Trust's activities (clinical and non-clinical) both generally and in support of the annual governance statement.</li><li>• <u>Review the adequacy and effectiveness of all risk and control related disclosure statements (in particular the annual governance statement), together with any accompanying head of internal audit opinion, external audit opinion or other appropriate independent assurances, prior to submission to the Board.</u></li></ul> <p>On behalf of the Board it is responsible for ensuring effective financial decision-making,</p>

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	<p>management and internal control including:</p> <ul style="list-style-type: none"> <li>• management of the Foundation Trust's activities in accordance with statute and regulations;</li> <li>• the establishment and maintenance of a system of internal control to give reasonable assurance that assets are safeguarded, waste or inefficiency avoided and reliable financial information produced, and that value for money is continuously sought.</li> </ul>
<b>3</b>	<p><b>Authority/Accountability</b></p> <p>The Committee is an assurance committee of the Board of Directors, authorised to establish and delegate powers to sub-committee(s) and work groups. The Committee will oversee the work of those sub-committee(s) and work groups.</p> <p>The Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any member of staff and all members of staff are directed to co-operate with any request made by the Committee.</p> <p>The Committee is authorised by the Board to obtain outside legal or independent professional advice or expertise as required to support it in discharging its duties. The budget for such advice must be within agreed financial constraints.</p> <p>The Committee is authorised to make decisions that are not reserved to the Trust Board. Reference should be made, as appropriate to the Standing Orders and Standing Financial Instructions of the Trust.</p> <p>The following matters must be referred to the Board:</p> <ul style="list-style-type: none"> <li>• Where there is significant revenue, capital or cash implications as determined by the Trust's Standing Financial Instructions</li> <li>• Conflict with statutory obligations, or have significant governance implications</li> <li>• Likely to arouse significant public or media interest.</li> </ul>
<b>4.</b>	<p><b>Objectives of Committee</b></p> <p><b>Financial statements and the annual report</b></p> <p>The Committee will:</p> <ul style="list-style-type: none"> <li>• monitor the integrity of the financial statements of the Foundation Trust, and any other normal announcements relating to the Trust's financial performance, reviewing the significant financial reporting judgements contained in them</li> <li>• review the Annual Statutory Accounts, before they are presented to the Board for approval, in order to determine their completeness, objectivity, integrity and accuracy. This review will cover but is not limited to: <ul style="list-style-type: none"> <li>• the meaning and significance of the figures, notes and significant changes;</li> <li>• areas where judgement has been exercised;</li> <li>• adherence to accounting policies and practices;</li> <li>• explanation of estimates or provisions having material effect;</li> <li>• the schedule of losses and special payments;</li> <li>• any unadjusted statements; and</li> <li>• any reservations and disagreements between the external auditors and management which have not been satisfactorily resolved.</li> </ul> </li> <li>• recommend to the Board that the Annual Statutory Accounts are approved</li> <li>• review the Annual Report and Annual Governance Statement and recommend to the Board of Directors that the documents are approved</li> <li>• review each year the accounting policies of the Trust and make appropriate recommendations to the Board</li> <li>• Review all accounting and reporting systems for reporting to the Board, including in respect of budgetary control</li> <li>• the Committee will be notified of and scrutinise losses, write-offs and compensation including special payments, ex-gratia payments and extrastatutory or extra regulatory payments.</li> </ul>

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## Internal Control and Risk Management

The Committee will:

- review the Foundation Trust's internal financial controls to ensure the provision and maintenance of an effective system of financial risk identification and associated controls, reporting and governance
- review and maintain an oversight of the Foundation Trust's general internal controls and risk management systems
- review processes to ensure appropriate information flows to the Committee from executive management and other Board committees in relation to the Trust's overall internal control and risk management position
- With regard to the local counter fraud specialist it will review, approve and monitor counter fraud work plans, receiving regular updates on counter fraud activity, monitor the implementation of action plans and discuss NHS Counter Fraud Authority (NHSCFA) quality assessment reports. It will review the adequacy of the policies and procedures in respect of all counter-fraud work ~~and-~~ Receive the annual report from counter fraud
- review the adequacy of underlying assurance processes that indicate the degree of achievement of corporate objectives and the effectiveness of the management of principal risks, including the Board Assurance Framework (BAF).
- utilise and review the work of the internal audit, external audit and other assurance functions as well as reports and assurances sought from directors, managers, committee's and other investigatory outcomes so as to fulfil its functions in connection with these terms of reference
- review the adequacy of policies and procedures for ensuring compliance with relevant regulatory, legal and conduct requirements
- Oversee all risks delegated to the Committee via the Corporate Risk Register (CRR) and Board Assurance Framework (BAF) and will receive assurance risks are being appropriately managed and mitigated. The Committee should determine if the appropriate level of risk has been identified, review the effectiveness of the controls in place relevant to the risks, review and challenge the strength of the assurances provided, identify any gaps in control or assurance and ensure that the risk lead identifies appropriate actions to address such gaps. The Committee should provide assurance to the Board on the risks delegated to the Committee and highlight any key areas of concern identified by the Committee
- Have oversight on Information Governance arrangements and risk mitigation
- Review and monitor the systems and processes of information governance within the organisation ensuring decisions are in line with the Trust's overall strategic direction, regulatory frameworks and legislation.
- Have oversight on Cyber Security arrangements and risk mitigation

## Emergency Planning Resilience and Response (EPRR)

The Committee will:

- (i) review and monitor compliance with the NHS England EPRR core standards, Civil Contingencies Act 2004 and provide positive assurance to the Board of compliance.

## Corporate Governance

The Committee will:

- monitor and provide assurance to the Board on corporate governance compliance (e.g. compliance with terms of the NHS Provider Licence, Constitution, NHS Codes of Conduct Governance, Standing Orders, Standing Financial Instructions, the Fit and Proper Persons tests and maintenance of Registers of Interests).
- consider the outcomes of significant reviews carried out by other bodies which include but are not limited to regulators and inspectors within the health and social care sector and professional bodies with responsibilities that relate to staff performance and functions.

## Internal Audit

The Committee will:

- at least annually, monitor and review the effectiveness of the Foundation Trust's internal audit function, taking into consideration relevant UK professional and regulatory requirements
- review and approve the internal audit strategy and programme, ensuring that it is consistent with the needs of the organisation. This includes ensuring the programme covers the breadth of the internal control environment ensuring relevant coverage of Clinical Quality, Governance, Risk Management and Legislation, performance and Data Quality, Workforce and Finance
- oversee on an ongoing basis the effective operation of internal audit in respect of:
  - adequate resourcing;
  - its co-ordination with external audit;
  - meeting relevant internal audit standards;
  - providing adequate independence assurances;
- it having appropriate standing within the Foundation Trust; consider the major findings of internal audit investigations and management's response and their implications and monitor progress on the implementation of recommendations
- consider the provision of the internal audit service, the cost of the audit and any questions of resignation and dismissal of internal audit staff
- where an audit report relates to a follow-up audit and high risk recommendations are still outstanding, the Executive Director shall attend the Committee meeting to provide an update on actions taken to address these recommendations
- an audit recommendation self-assessment report, which includes a log of audit reports submitted to the Committee and any outstanding actions, shall be submitted to each meeting of the Committee for review
- directors are responsible for providing an update at the Committee meetings on any outstanding actions that fall within their remit
- assuring itself that the management of the Trust has implemented the agreed recommendations of internal audit reports in a timely and effective way.

## External Audit

The Committee will:

- review and monitor the effectiveness of the external audit process, taking into consideration relevant UK professional and regulatory requirements
- assess the external auditor's work and fees each year. This assessment should include the review and monitoring of the external auditor's independence and objectivity and effectiveness of the audit process in light of relevant professional and regulatory standards
- oversee the conduct of a market testing exercise for the appointment of an auditor at least once every five years and, based on the outcome, support the Council of Governors in the appointment of the external auditors
- the Council of Governors will take the lead in agreeing with the Committee the criteria for appointing, re-appointing and removing external auditors. To support them in this task the Audit and Risk Committee should:
  - provide information on the external auditor's performance, including details such as the quality and value of the work, the timeliness of reporting and fees.
  - Advise the Council of Governors in respect of the appointment, re-appointment and removal of an external auditor and related fees as applicable. To the extent that advice is not adopted by the Council of Governors, this shall be included in the annual report, along with the reasons for non-adoption.
  - discuss with the external auditor, before the audit commences, the nature and scope of the audit, and ensure coordination, as appropriate, with other external auditors in the local health economy.
  - review external audit reports, including the Annual Audit Letter, together with the management response, and to monitor progress on the implementation of

- recommendations.
- to develop and implement a policy on the engagement of the external auditor to supply non-audit services, taking into account relevant ethical guidance.

#### Standing Orders, Standing Financial Instructions and Standards Of Business

The Committee will:

- review Standing Orders, Standing Financial Instructions and any waiver or suspension on the documents
- review the reasons for such waivers or suspensions must be reported by the Lead Executive to the Board of Directors and reports shall be received by the Committee.
- review the Scheme of Delegation.

#### Other

The Committee will:

- review performance indicators relevant to the remit of the Committee
- examine any other matter referred to the Committee by the Board and initiate investigation as determined by the Committee. Report back to the Board on any finding following an investigation
- the Chief Executive shall demonstrate that, where there is the use of private finance represents value for money and genuinely transfers risk to the private sector. Reports shall be received by the Committee.
- oversee the work of, and receive assurance from the Information Governance, Cyber Security & Artificial Intelligence Group, ~~Digital Assurance Group (including data standards and data security arrangements)~~
- oversee the work of, and receive assurance from, the Policy Governance Group
- oversee the work of, and receive assurance from, the Risk Oversight Group

The Committee will uphold the values of the Trust in the work it does. In particular it will look for assurances that these values are being delivered in the Trust, as part of its overall governance role on behalf of the Board.

The committee has delegated its oversight responsibility in respect of Freedom to Speak Up/Whistleblowing to the Quality Assurance Committee and the People Committee, and receives assurance on the discharging of this responsibility (in meeting HFMA requirements) through their annual reports and review of effectiveness received at the Audit and Risk Committee and Board of Directors.

The committee has delegated its oversight responsibility in respect of clinical audit work to the Quality Assurance Committee and received assurance on clinical audit through their annual reports.

#### 5. Membership

The membership of the Committee will be:

- Three Non-Executive Directors (one of which, with recent and relevant financial experience, will be appointed by the Board to chair the meetings)
- The Trust Chair should not be a member of the Committee,
- The Committee shall have sufficient skills amongst its members to be able to discharge its responsibilities

Executive Directors should not be appointed to the Committee. The role of the Executive is to attend, to provide information, and to participate in discussions, either for the whole duration of a meeting or for particular items. Other Non-Executive Directors / Associate Non-Executive Directors can attend as desired but will not form part of the permanent membership of this committee unless formally deputising for a committee member.

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	Membership will be reviewed annually.
6.	<b>Attendees</b> <p>Meetings of the Committee will normally be attended by the following or any successor roles:</p> <ul style="list-style-type: none"> <li>• Executive Director of Finance</li> <li>• <del>Director of Strategy</del></li> <li>• <u>Associate</u> Director of <u>Communications and</u> <del>Corporate Governance</del> (Trust Board Secretary)</li> <li>• Head of Corporate Assurance</li> <li>• Deputy Director of Finance</li> <li>• A representative of the external auditors and a representative of the internal auditors</li> <li>• A representative of the local counter fraud service may be invited to attend meetings of the Audit &amp; Risk Committee.</li> <li>• Committee Administrator</li> <li>• Governor observer</li> </ul> <p>Other Non-executive Directors can attend as desired. Other Executive Directors or Trust officers will be invited to attend the Committee dependent on the business being discussed.</p>
7.	<b>Chair, Quorum, Attendance and Meetings</b> <p><b>Chair</b></p> <p>The Non-Executive Director Chair will preside at all meetings having been approved as the Chair by the Board or appointed as such by the Trust Board Chair. In extraordinary circumstances where the Chair cannot attend, one of the Non-Executive Director members will chair the meeting.</p> <p><b>Quorum</b></p> <p>The Committee is quorate when at least 2 members are present. <u>If quoracy cannot be achieved there can be options to invite other non-executive directors to attend for a single meeting (excluding the chair), or the meeting can go ahead and any actions or decisions (dependent on the nature) could be ratified at the next committee meeting, or by the next board.</u></p> <p>Deputies may attend, with the agreement of the Chair. This will be by exception; they must be fully briefed and if formally deputising will count towards the quorum.</p> <p>If the Committee is not quorate the meeting may be postponed at the discretion of the Chair. If the meeting does take place and is not quorate no decisions shall be made at the meeting and such matters must be deferred until the next quorate meeting.</p> <p><u>If the executive lead is unable to attend, the meeting should be moved. If this is not possible, a deputy may be sent, with the agreement of the Chair. This will be by exception, and they must be fully briefed and if formally deputising will count towards the quorum, even if they are not an executive director.</u></p> <p><b>Attendance</b></p> <p>Members are expected to attend all meetings. Apologies must be received by the Administrator in advance of the meetings. All members will be required to attend <b>a minimum</b> of two thirds of all meetings held annually. Members should not be absent for more than two consecutive meetings without the agreement of the Chair.</p> <p>With the prior agreement of the Chair of the Committee any Committee member may participate remotely provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person but will be recorded as having attended remotely in the minutes and is counted in a quorum and entitled to vote.</p> <p><u>With the prior agreement of the Chair of the Committee any Committee member may participate remotely provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person but will be recorded as</u></p>

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having attended remotely in the minutes and is counted in a quorum and entitled to vote. Where a decision needs to be taken outside the normal cycle of meetings, and where the matter is not deemed by the Chair to require an additional meeting to be called, the decision may be made via e-mail.

The meeting is deemed to take place where the largest group of those participating is assembled, or if there is no such group, where the Chair of the meeting is located. The Chair and the CEO as accountable/accounting officer will be invited to attend meetings and should discuss at least annually with the committee the process for assurance that supports the governance statement. They should also attend when the committee considers the draft annual governance statement and the annual report and accounts.

Representatives from other organisations (for example, the NHS Counter Fraud Authority (NHSCFA)) and other individuals may be invited to attend on occasion, by invitation.

#### **Meetings**

Where a specific matter is deemed to be of a confidential or commercially sensitive nature the Chair has the authority to restrict attendance at the meeting to members only and to ask all invitees to leave the meeting.

If any member or invitee has an interest, pecuniary or otherwise, in any matter and is present at the meeting at which the matter is under discussion, they will declare that interest as early as possible and shall not participate in the discussions. The Chair will have the power to request that member or invitee to withdraw until its consideration has been completed.

#### Private meetings

It is good practice is for the committee to meet annually with representatives of internal and external audit, as well as the local counter fraud specialist, outside of the formal meeting and the Chair of the committee to allow the auditors to raise issues. It is for the committee chair to agree how any matters that do arise in these discussions are handled.

Additional meetings may be scheduled to discuss specific issues if required.

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### **8. Frequency and Notice of Meetings**

#### **Frequency**

The Committee will normally meet five times per year. Additional meetings can be arranged for specific purposes as necessary, with agreement by the Chair.

If a matter of urgent business arises and an extraordinary meeting is required, this may be convened by the Chair, subject to the agreement of a quorum number of members. Decisions will be subject to achieving quorum attendance.

Where a decision needs to be taken outside the normal cycle of meetings, and where the matter is not deemed by the Chair to require an additional meeting to be called, the decision may be made via e-mail. The preference is for decisions to be taken at meetings. The decisions via e-mail process will be used on an exceptions basis. The process for decision via e-mail will be as follows:

- a) An e-mail setting out the matter for decision will be sent to all members on the same working day. This shall include a statement setting out how the members should signify what their view on the matter is and the deadline for doing so.
- b) Members will generally be given no less than five working days in which to respond.
- c) For a decision to be passed, all of the members must express the same view on the matter.
- d) Where members have comments on the proposed decision or recommendation/s these will be circulated to other Committee members by the Administrator within one working day of receipt.
- e) If any individual member wishes to debate an item proposed for decision via e-mail at a meeting instead they may ask the Chair to arrange an additional meeting or defer the item

for decision until the next meeting (such agreement by the Chair not to be unreasonably withheld).

- f) Decisions via e-mail will be reported to the next meeting and the wording of the decision minuted. Any decision made in this manner will be effective from the date of agreement of all of the members and confirmed by email by the Administrator.

#### Notice of meetings

Meetings shall be called by the Administrator at the request of the Chair or any of its members.

Unless otherwise agreed, notice of each meeting and agenda of items to be discussed, shall be forwarded to each member, any other person required to attend no later than five full working days before the date of the meeting. Supporting papers shall be sent to members and to other attendees as appropriate, at the same time.

Notices, agendas and supporting papers can be sent in electronic form where the recipient has agreed to receive documents in such a way.

A meeting workplan will be agreed on an annual basis, setting out the main work items to be carried out at each meeting to ensure that adequate time is given to the main objectives of the Committee.

### 9. Minutes and Reporting Arrangements

The Committee will report to the Board on how it discharges its responsibilities.

The approved minutes of Committee meetings will be formally recorded and submitted to the Board by the Chair of the Committee (supported by the Corporate Governance team).

The Chair of the Committee will draw to the attention of the Board any issues or decisions that require disclosure to the Trust Board, or require executive action via the Alert, Advise Assure (AAA) report.

The Committee will provide an annual report and review of effectiveness to the Board of Directors on how it has met its obligations. Similarly any Tier II groups reporting into the committee will provide AAA reports and an annual report and review of their effectiveness to their Tier I committee.

In addition, the Committee will receive thematic 'deep dive' reports or reviews as required to enable greater discussion about specific issues and to facilitate in depth discussions between the members and those staff providing services.

The Board has ultimate responsibility for the effectiveness of its governance below Board. The Board will rely on the work of its Committees to provide assurance on the effectiveness of the governance structure.

### 10. Administrative arrangements

The Committee will be supported by a nominated Administrator who will:

- produce a schedule of meetings and maintain the annual work plan for the Committee
- prepare the agenda and papers with the Chair, the Executive Lead and the associate Director of Communications and Corporate Governance/ head of Corporate Assurance and circulate ideally 5 working days prior to the meeting and no less than 3 working days, except for reasons outlined and agreed with the Chair of the Committee.
- maintain accurate records of attendance, key discussion points and decisions taken and issue necessary action logs within five full working days of the ~~meeting~~meeting: including actions which have been cross referred to another Board assurance committee for oversight.
- draft minutes, recording where the Committee has delivered its purpose through

## People Committee Terms of Reference

Document History:	
Version Number:	5.1
Approved by: (parent Committee/group)	Board of Directors
Date approved:	24 July 2024
Name of Committee/Group	People Committee
Type of Committee/Group	Board Assurance Committee reporting to the Board of Directors ("Board")

1.	Purpose of Committee/Group
	<p>The People Committee ("the Committee") has been established to provide assurance to the Board in consultation with the other Board Committees that adequate and appropriate governance structures, processes and controls are in place in respect of the workforce, organisational development and any other matters that shall be determined to fall within its remit.</p> <p>The Committee has primary responsibility for receiving assurance regarding all aspects of strategic workforce and organisational development relating to staff in support of getting the best outcomes.</p> <p>The Committee will provide assurance to the Board regarding the following strategic areas: workforce, equality and diversity, recruitment and retention, staff development, role transformation, staff health, safety and wellbeing, organisation development and design, culture development, staff engagement, leadership development, talent management and succession planning.</p>
2.	Scope
	<p>The scope of the Committee is Trust wide it will:</p> <ul style="list-style-type: none"> <li>Assure the Board that the Trust is meeting its legal and regulatory and moral duties in relation to its employees.</li> <li>Receive assurance into any area of work within its remit on behalf of the Board.</li> </ul> <p>In fulfilling its obligations, the Committee will be mindful of the need to improve the diversity of the workforce so that it more accurately reflects the populations which the Trust serves.</p>

3.	<p><b>Authority/Accountability</b></p> <p>The Committee is an assurance Committee of the Board of Directors group authorised to establish and delegate powers to sub-committee(s) and work groups. The Committee will oversee the work of these sub committees and work groups.</p> <p>The Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any member of staff and all members of staff are directed to co-operate with any request made by the Committee.</p> <p>The Committee is authorised by the Board to obtain outside legal or other independent professional advice and expertise as required to support it in discharging its duties. The budget for such advice must be within agreed financial constraints.</p> <p>The Committee is authorised by the Board to make decisions that are not of a significant matter to the Board. Reference should be made, as appropriate to the Standing Orders and Standing Financial Instructions of the Trust.</p> <p>The following matters must be referred to Board:</p> <ul style="list-style-type: none"> <li>• Where there is significant revenue, capital or cash implications as determined by the Trust's Standing Financial Instructions</li> <li>• Conflict with statutory obligations, or have significant governance implications</li> <li>• Likely to arouse significant public or media interest.</li> </ul>
4.	<p><b>Objectives of Committee/Group</b></p> <p>The Committee will:</p> <ul style="list-style-type: none"> <li>• provide assurance to the Board of Directors that Committee members are assured that there is a positive working environment for staff that promotes psychological safety, a supportive, open culture that helps staff do their job to the best of their ability.</li> <li>• provide assurance to the Board of Directors that Committee Members are assured that there is support and opportunities for staff to maintain their health, wellbeing and safety.</li> <li>• be assured that staff engagement strategies are in place prior to consultation exercises with staff to enable staff to be fully engaged in the decision-making processes that affect them and the services they provide, individually, through representative organisations and through local partnership working arrangements.</li> <li>• be assured that appropriate policies to raise issues, grievances and concerns are in place, are fit for purpose and allow fair and consistent treatment of staff.</li> <li>• review achievement against the following strategic areas – workforce, equality and diversity, recruitment and retention, staff health, <del>safety</del> and wellbeing, organisation development, and achievement of goals set out in the People Strategy <u>and associated People-plan, Delivery Plan and Organisational Development Plan</u>.</li> <li>• be assured that there is an appropriate range and scope of training for all members of staff.</li> <li>• act as the forum for People risks being discussed, ensuring actions are taken and action plans carried out to completion, and ensuring there are robust links across directorates to ensure a culture of risk management is present throughout the organisation. The committee will ensure robust mechanisms are in place to maintain its registration with any required regulatory bodies; oversee all risks delegated to the Committee via the Corporate Risk Register (CRR) and Board Assurance Framework (BAF); the Committee should determine if the appropriate level of risk has been identified, review the effectiveness of the controls in place relevant to the risks, review and challenge the strength of the assurances provided, identify any gaps in control or assurance and ensure that the risk lead identifies appropriate actions to address such gaps. The Committee should provide assurance to the Board on the risks delegated to the Committee and highlight any key areas of concern identified by the Committee.</li> <li>• The committee has responsibility along with the Quality Assurance Committee for oversight of Freedom to Speak Up/Whistleblowing arrangements as delegated to it by the Audit and</li> </ul>

	<p>Risk Committee (in ensuring the Trust meets HFMA requirements). Assurance on the discharging of this is provided to Audit and Risk Committee via the Annual Report and review of effectiveness reporting.</p> <p>The Committee will uphold the values of the Trust in the work it does. In particular, it will look for assurances that these values are being delivered in the Trust, as part of its overall governance role on behalf of the Board.</p>
5.	<p><b>Membership</b></p> <p>The voting membership of the Committee will be:</p> <ul style="list-style-type: none"> <li>• Three Non-Executive Directors (one of which will chair the meeting)</li> <li>• Executive Director of People (Executive Lead)</li> <li>• Executive Director of Nursing, Professions and Quality</li> <li>• Director of Operations</li> </ul> <p>Other Non-Executive Directors / Associate Non-Executive Directors and Executive Directors can attend as desired but will not form part of the permanent membership of the Committee.</p> <p>Membership will be reviewed annually.</p>
6.	<p><b>Attendees</b></p> <p>Meetings of the Committee will normally be attended by the following or any successor <del>roles:</del> <u>roles:</u></p> <ul style="list-style-type: none"> <li>• Deputy Director of People (Head of People Transformation and Operations)</li> <li>• Head of Leadership and Organisation Development</li> <li>• Head of Equality and Inclusion</li> <li>• Head of Workforce Development and Training</li> <li>• Nominated Doctor</li> <li>• <del>Director of Corporate Governance</del> <u>Associate Director of Communications &amp; Corp Gov</u></li> <li>• <del>Head of Corporate Assurance</del> <u>remove and have as a deputy for ADCCG?</u></li> <li>• Governor <del>e</del><u>O</u>bserver</li> </ul> <p>Other directors or their deputies may be asked to attend meetings or part meetings for discussions on matters relating to their portfolio, if required. The provisions of the Trust's Standing Orders relating to acting up arrangements and joint members will apply to this Committee with respect to decision making <del>authority</del> <u>authority</u>.</p> <p>The Committee may invite other persons to attend a meeting <del>so as to</del> <u>to</u> assist in deliberations. The Chair shall be notified of this prior to the meeting.</p> <p>The <u>Associate Director of communication and corporate governance</u> <del>Director of Governance</del> (Board Secretary) will provide advice to the Chair and members and ensure that the Committee has the appropriate administrative support. A minute taker will also attend all Committee/Group meetings and be stated as being in attendance.</p>
7.	<p><b>Chair, Quorum, Attendance and Meetings</b></p> <p><b>Chair</b></p> <p>The Non-Executive Director Chair will preside at all meetings having been approved as the Chair by the Board or appointed as such by the Trust Board Chair. In extraordinary circumstances where the Chair cannot attend, one of the Non- Executive Director members will chair the meeting.</p> <p><b>Quorum</b></p> <p>A quorum will be 3 members and must include 2 Non-Executive Directors (and 1 Executive Director).</p>

Deputies may attend, with the agreement of the Chair. This will be by exception; they must be fully briefed and if formally deputising will count towards the quorum.

If the executive lead is unable to attend, the meeting should be moved. If this is not possible, a deputy may be sent, with the agreement of the Chair. This will be by exception, and they must be fully briefed and if formally deputising will count towards the quorum, even if they are not an executive director.

If the Committee is not quorate the meeting may be postponed at the discretion of the Chair. If the meeting does take place and is not quorate no decisions shall be made at that meeting and such matters must be deferred until the next quorate meeting.

### **Attendance**

Members are expected to attend all meetings. Apologies must be received by the Administrator in advance of the meetings. All members will be required to attend **a minimum** of two thirds of all meetings held annually. Members should not be absent for more than two consecutive meetings without the agreement of the Chair.

With the prior agreement of the Chair of the Committee any Committee member may participate remotely provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person but will be recorded as having attended remotely in the minutes and is counted in a quorum and entitled to vote.

### **Meetings**

Where a specific matter is deemed to be of a confidential or commercially sensitive nature the Chair has the authority to restrict attendance at the meeting to members only and to ask all invitees to leave the meeting.

If any member or invitee has an interest, pecuniary or otherwise, in any matter and is present at the meeting at which the matter is under discussion, they will declare that interest as early as possible and shall not participate in the discussions. The Chair will have the power to request that member or invitee to withdraw until its consideration has been completed.

## **8. Frequency and Notice of Meetings**

### **Frequency**

The Committee will normally meet bi-monthly. Additional meetings can be arranged for specific purposes as necessary, with agreement by the Chair.

If a matter of urgent business arises and an extraordinary meeting is required, this may be convened by the Chair, subject to the agreement of a quorum number of members. Decisions will be subject to achieving quorum attendance.

Where a decision needs to be taken outside the normal cycle of meetings, and where the matter is not deemed by the Chair to require an additional meeting to be called, the decision may be made via e-mail. The preference is for decisions to be taken at meetings. The decisions via e-mail process will be used on an exception basis. The process for decision via e-mail will be as follows:

- a) An e-mail setting out the matter for decision will be sent to all members on the same working day. This shall include a statement setting out how the members should signify what their view on the matter is and the deadline for doing so.
- b) Members will be generally given no less than five working days in which to respond.
- c) For a decision to be passed, all of the members must express the same view on the matter.
- d) Where members have comments on the proposed decision or recommendation/s these will be circulated to other Committee members by the Administrator within one working day of receipt.



- e) If any individual member wishes to debate an item proposed for decision via e- mail at a meeting instead they may ask the Chair to arrange an additional meeting or defer the item for decision until the next meeting (such agreement by the Chair not to be unreasonably withheld).
- f) Decisions via e-mail will be reported to the next meeting and the wording of the decision minuted. Any decision made in this manner will be effective from the date of agreement of all of the members and confirmed by email by the Administrator.

### Notice of meetings

Meetings shall be called by the Administrator at the request of the Chair or any of its members.

Unless otherwise agreed, notice of each meeting and agenda of items to be discussed, shall be forwarded to each member, any other person required to attend no later than three full working days before the date of the meeting. Supporting papers shall be sent to members and to other attendees as appropriate, at the same time.

Notices, agendas and supporting papers will normally be sent in electronic form.

A meeting calendar will be agreed on an annual basis, setting out the main work items to be carried out at each meeting to ensure that adequate time is given to the main objectives of the Committee.

## 9. Minutes and Reporting Arrangements

The Committee will report to Board on how it discharges its responsibilities.

The approved minutes of Committee meetings will be formally recorded and submitted to the Board by the Chair of the Committee (supported by the Corporate Governance team).

The Chair of the Committee will draw to the attention of the Board any issues or decisions that require disclosure to the Trust Board, or require executive action via the Alert, Advise Assure (AAA) report.

The Committee will provide an annual report and review of effectiveness to the Board of Directors on how it has met its obligations. Similarly, any Tier II groups reporting into the committee will provide AAA reports and an annual report and review of their effectiveness to their Tier I committee.

In addition, the Committee will receive thematic 'deep dive' reports or reviews as required to enable greater discussion about specific issues and to facilitate in depth discussions between the members and those staff providing services.

The Board has ultimate responsibility for the effectiveness of its governance below Board. The Board will rely on the work of its committees to provide assurance on the effectiveness of the governance structure.

## 10. Administrative arrangements

The Committee will be supported by a nominated Administrator who will:

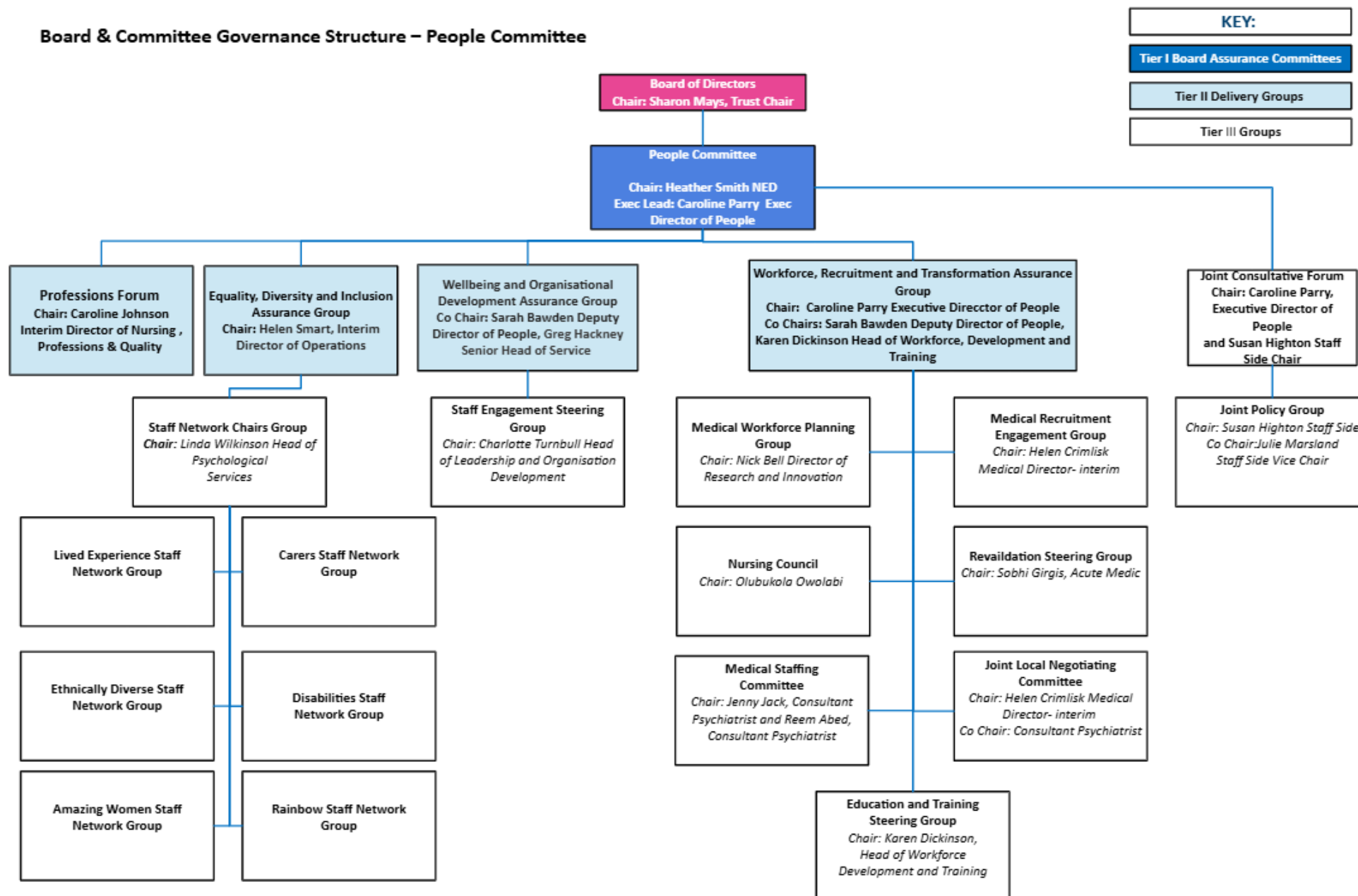
- produce a schedule of meetings and maintain the annual work plan for the Committee
- prepare the agenda and papers with the Chair, the Executive Lead and the Head of corporate assurance ~~Director of Corporate Governance~~ and circulate ideally 5 working days prior to the meeting and no less than 3 working days except for reasons outlined to, and agreed with, the Chair
- maintain accurate records of attendance, key discussion points and decisions taken and issue necessary action logs within five full working days of the meeting.
- draft minutes, recording where the Committee has delivered its purpose through relevant reports and subsequent discussion, debate and challenge, and where further information is required, for circulation to the meeting Chair within five full working days of the meeting.
- organise future meetings; and file and maintain records in the required corporate records folder.



11.	<b>Meeting effectiveness review</b>								
	<p>The Committee shall at least once a year, review its own performance, constitution and terms of reference to ensure it is operating at maximum effectiveness and recommend any changes it considers necessary to its parent body for approval.</p> <p>A record of the frequency of attendance by members, quoracy and the frequency of meetings will be maintained. Any areas of concern will be highlighted to the Chair of the Committee.</p>								
12.	<b>Review to be conducted by Committee/Group/Forum Chair Meeting effectiveness review</b>								
	<table border="1"> <tr> <td data-bbox="209 902 874 976"><b>Date Committee/Group established</b></td><td data-bbox="879 902 1530 976">19 November 2013</td></tr> <tr> <td data-bbox="209 983 874 1057"><b>Terms of Reference to be reviewed</b></td><td data-bbox="879 983 1530 1057">Annually</td></tr> <tr> <td data-bbox="209 1064 874 1137"><b>Date of last review</b></td><td data-bbox="879 1064 1530 1137">July 2024</td></tr> <tr> <td data-bbox="209 1144 874 1182"><b>Date of next review</b></td><td data-bbox="879 1144 1530 1182">May 2025 at committee and July 2025 for Board approval</td></tr> </table>	<b>Date Committee/Group established</b>	19 November 2013	<b>Terms of Reference to be reviewed</b>	Annually	<b>Date of last review</b>	July 2024	<b>Date of next review</b>	May 2025 at committee and July 2025 for Board approval
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<b>Date of last review</b>	July 2024								
<b>Date of next review</b>	May 2025 at committee and July 2025 for Board approval								

# Sheffield Health and Social Care NHS FT Corporate Governance Structure

## Board & Committee Governance Structure – People Committee



# Terms of Reference Quality Assurance Committee

Document History:	
Version Number:	14
Approved by:	Trust Board
Date approved:	16 May 2024

Name of Committee	Quality Assurance Committee
Type of Committee	Board Assurance Committee reporting to Board of Directors (the "Board")

1.	<p><b>Purpose of Committee</b></p> <p>The Quality Assurance Committee (the "Committee") has been established to oversee and ensure the effective delivery of:</p> <ul style="list-style-type: none"> <li>• safe care at all times;</li> <li>• timely access to effective care;</li> <li>• positive experience and outcomes for service users and carers;</li> <li>• effective quality assurance and improvement underpins all we do.</li> </ul> <p>The Committee shall provide assurance to the Board on the probity of the Trust and support the other Board Committees in the achievement of clinical effectiveness and safe outcomes for service users, maintaining positive service user and carer experience and equality and inclusion.</p> <p>Some specific areas identified by NHSE are requiring oversight at committee level or by named individuals and which would be covered by this committee as part of regular reporting includes where relevant: <i>Hip fracture, falls and dementia; learning from deaths; safety and risk; palliative and end of life care; health and safety; children and young people; resuscitation policy and safeguarding.</i></p>
2.	<p><b>Scope</b></p> <p>The scope of the Committee is Trust-wide. It will review and monitor arrangements around quality and safety of care, experience and outcomes following an annual programme of work.</p>
	<p><b>Authority/Accountability</b></p>

3.

The Committee is an assurance Committee of the Board of Directors, authorised to establish and delegate powers to sub-committee(s) and work groups. The Committee will oversee the work of those sub-committee(s) and work groups.

The Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Board to obtain outside legal or other independent professional advice and expertise as required to support it in discharging its duties. The budget for such advice must be within agreed financial constraints.

The Committee is authorised to make decisions that are not reserved to the Trust Board. Reference should be made, as appropriate to the Standing Orders and Standing Financial Instructions of the Trust.

The following matters that must be referred to the Trust Board:

- Where there is significant revenue, capital or cash implications as determined by the Trust's Standing Financial Instructions
- Conflict with statutory obligations, or have significant governance implications
- Likely to arouse significant public or media interest.

4.	<p><b>Objectives of Committee</b></p> <p>The Committee will:</p> <ul style="list-style-type: none"> <li>• ensure Trust-wide clinical governance, clinical risk management arrangements and quality improvement and assurance strategies are in place and fit for purpose;</li> <li>• ensure clinical governance and clinical risk management systems and processes are continually developed and monitored to deliver high quality clinical care to the highest standards and minimise risk to service users;</li> <li>• ensure that negotiations with commissioners and stakeholders are based on maintaining high quality standards;</li> <li>• oversee the key performance indicators capable of demonstrating improvements in safety, effectiveness and service user experience and/or early warning of risk at all levels of the organisation;</li> <li>• oversee development and review of the Annual Quality Report and recommend approval to the Board of Directors;</li> <li>• seek assurance that service users and carers are engaged in the business of the organisation and have a voice in service provision, organisational change and service improvements;</li> <li>• seek assurance that risk management processes are underpinned by a culture of openness and transparency;</li> <li>• ensure robust mechanisms are in place to maintain its registration with any required regulatory bodies; oversee all risks delegated to the Committee via the Corporate Risk Register (CRR) and Board Assurance Framework (BAF); the Committee should determine if the appropriate level of risk has been identified, review the effectiveness of the controls in place relevant to the risks, review and challenge the strength of the assurances provided, identify any gaps in control or assurance and ensure that the risk lead identifies appropriate actions to address such gaps. The Committee should provide assurance to the Board on the risks delegated to the Committee and highlight any key areas of concern identified by the Committee.</li> <li>• monitor improvement following visits by the Care Quality Commission, including evidence of practice being embedded where necessary;</li> <li>• monitor the timely review of policies in relation to its area of responsibility following approval by the Policy Governance Group;</li> <li>• review the outcome of audits relating to its area of responsibility and contribute views to the Audit and Risk Committee as required;</li> </ul> <p>The Committee will uphold the values of the organisation in the work it does. In particular it will look for assurances that these values are being delivered as part of its overall governance role on behalf of the Board.</p>
5.	<p><b>Membership</b></p> <p><b>The membership of the Committee will be:</b></p> <ul style="list-style-type: none"> <li>• Three Non-Executive Directors (one of which will be appointed chair)</li> <li>• Executive Director of Nursing, Professions and Quality (Executive Lead)</li> <li>• Executive Medical Director</li> </ul>

	<p>Other Non-Executive Directors / Associate Non-Executive Directors and Executive Directors can attend as desired but will not form part of the permanent membership of the Committee unless formally deputising for a committee member.</p> <p>Membership will be reviewed annually.</p>
6.	<p><b>Attendees</b></p> <p>Meetings will normally be attended by:</p> <ul style="list-style-type: none"> <li>• Director of Operations</li> <li>• <u>Deputy Director of Operations</u></li> <li>• <u>Deputy Director of Nursing and Quality – Nursing and Leadership</u></li> <li>• <u>Head of Nursing – Rehab and Specialist</u></li> <li>• <u>Director of Performance and Delivery</u></li> <li>• <u>Director of Corporate Governance</u><u>Associate Director of Communications and Corporate Governance</u>/ Head of Corporate Assurance</li> <li>• <del>Senior Head of Service</del></li> <li>• <u>Clinical Director/ Consultant Clinical Psychologist</u></li> <li>• <del>One representative from each Clinical Directorate clinical leadership team</del></li> <li>• Service User Representative</li> <li>• Committee Administrator</li> <li>• Governor Observer</li> </ul> <p>The Committee may invite other persons to attend a meeting so as to assist in deliberations. The Chair shall be notified of this prior to the meeting.</p> <p>Other directors or their deputies may be asked to attend meetings or part meetings for discussions on matters relating to their portfolio, if required. The provisions of the Trust's Standing Orders relating to acting up arrangements and joint members will apply to this Committee with respect to decision making authority.</p> <p>The <u>Associate Director of Communications and Corporate Governance</u><del>Director of Governance</del> (Board Secretary) will provide advice to the Chair and members and ensure that the Committee has the appropriate administrative support. A minute taker will also attend all Committee/Group meetings and be stated as being in attendance.</p>
7.	<p><b>Chair, Quorum, Attendance and Meetings</b></p>

## Chair

The Non-Executive Director Chair will preside at all meetings having been approved as the Chair by the Board or appointed as such by the Trust Board Chair. In extraordinary circumstances where the Chair cannot attend, one of the Non-Executive Director members will chair the meeting.

## Quorum

A quorum will be 3 members and must include 2 Non-Executive Directors and 1 Executive Director.

~~Deputies may attend, with the agreement of the Chair. This will be by exception; they must be fully briefed and if formally deputising will count towards the quorum.~~

If the executive lead is unable to attend, the meeting should be moved. If this is not possible, a deputy may be sent, with the agreement of the Chair. This will be by exception, and they must be fully briefed and if formally deputising will count towards the quorum, even if they are not an executive director.

If the Committee is not quorate the meeting may be postponed at the discretion of the Chair. If the meeting does take place and is not quorate no decisions shall be made at that meeting and such matters must be deferred until the next quorate meeting.

## Attendance

Members are expected to attend all meetings. Apologies must be received by the Administrator in advance of the meetings. All members will be required to attend a **minimum** of two thirds of all meetings held annually. Members should not be absent for more than two consecutive meetings without the agreement of the Chair.

~~Any Committee member may participate in a meeting by way of telephone, computer or any other electronic means of communication provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person although their actual location shall be noted in the minutes and is counted in a quorum and entitled to vote. The meeting is deemed to take place where the largest group of those participating is assembled, or if there is no such group, where the Chair of the meeting is located.~~

With the prior agreement of the Chair of the Committee any Committee member may participate remotely provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person but will be recorded as having attended remotely in the minutes and is counted in a quorum and entitled to vote.

## Meetings

Where a specific matter is deemed to be of a confidential or commercially sensitive nature the Chair has the authority to restrict attendance at the meeting to members only and to ask all invitees to leave the meeting.

If any member or invitee has an interest, pecuniary or otherwise, in any matter and is present at the meeting at which the matter is under discussion, they will declare that interest as early as possible and shall not participate in the discussions. The Chair will have the power to request that member or invitee to withdraw until its consideration has been completed.

## **8. Frequency and Notice of Meetings**

### **Frequency**

The Committee will meet a minimum of ~~ten~~eleven times a year. Additional meetings can be arranged for specific purposes as necessary, with agreement by the Chair.

If a matter of urgent business arises and an extraordinary meeting is required, this may be convened by the Chair, subject to the agreement of a quorum number of members. Decisions will be subject to achieving quorum attendance.

Where a decision needs to be taken outside the normal cycle of meetings, and where the matter is not deemed by the Chair to require an additional meeting to be called, the decision may be made via e-mail. The preference is for decisions to be taken at meetings. The decisions via e-mail process will be used on an exceptions basis. The process for decision via e-mail will be as follows:

- a) An e-mail setting out the matter for decision will be sent to all members on the same working day. This shall include a statement setting out how the members should signify what their view on the matter is and the deadline for doing so.
- b) Members will generally be given no less than five working days in which to respond.
- c) For a decision to be passed, all of the members must express the same view on the matter.
- d) Where members have comments on the proposed decision or recommendation/s these will be circulated to other Committee members by the Administrator within one working day of receipt.
- e) If any individual member wishes to debate an item proposed for decision via e-mail at a meeting instead they may ask the Chair to arrange an additional meeting or defer the item for decision until the next meeting (such agreement by the Chair not to be unreasonably withheld).
- f) Decisions via e-mail will be reported to the next meeting and the wording of the decision minuted. Any decision made in this manner will be effective from the date of agreement of all of the members and confirmed by email by the Administrator.

### **Notice of meetings**

Meetings shall be called by the Administrator at the request of the Chair or any of its members.

Unless otherwise agreed, notice of each meeting and agenda of items to be discussed, shall be forwarded to each member, any other person required to attend no later than five full working days before the date of the meeting.

Supporting papers shall be sent to members and to other attendees as appropriate, at the same time.



	<p>Notices, agendas and supporting papers can be sent in electronic form where the recipient has agreed to receive documents in such a way.</p> <p>A meeting workplan will be agreed on an annual basis, setting out the main work items to be carried out at each meeting to ensure that adequate time is given to the main objectives of the Committee.</p>
<b>9.</b>	<p><b>Minutes and Reporting Arrangements</b></p> <p>The Committee will report to the Board on how it discharges its responsibilities.</p> <p>The minutes of Committee meetings will be formally recorded and submitted to the Board of Directors by the Chair of the Committee (supported in this by the Corporate Governance team).</p> <p>The Chair of the Committee will draw to the attention of the Board of Directors any issues or decisions that require disclosure to the Board or require executive action via the Alert, Advise, Assure (AAA) report.</p> <p>Tier II groups will provide assurance to the committee as agreed within the governance structure.</p> <p>The committee will receive standing reports following each meeting and additional reports as part of the scheduled programme of annual reports.</p> <p>In addition, the Committee will receive thematic 'deep dive' reports or reviews as required to enable greater discussion about specific issues and to facilitate in depth discussions between the members and those staff providing services.</p> <p>The Board has ultimate responsibility for the effectiveness of its governance below Board. The Board will rely on the work of its Committees to provide assurance on the effectiveness of the governance structure.</p>
<b>10.</b>	<p><b>Administrative arrangements</b></p> <p>The Committee will be supported by a nominated Administrator who will:</p> <ul style="list-style-type: none"> <li>• produce a schedule of meetings and maintain the annual work plan for the Committee</li> <li>• prepare the agenda and papers with the Chair, the Executive Lead and the <del>Director of Corporate Governance</del> <b>Head of Corporate Assurance</b> and circulate ideally 5 working days prior to the meeting and no less than 3 working days except for reasons outlined and to, and agreed with, the Chair;</li> <li>• maintain accurate records of attendance, key discussion points and decisions taken and issue necessary action logs within five full working days of the meeting;</li> <li>• draft minutes, recording where the Committee has delivered its purpose through relevant reports and subsequent discussion, debate and challenge, and where further information is required, for circulation to the meeting Chair within five full working days of the meeting;</li> <li>• <u>organise future meetings;</u></li> <li>• and file and maintain records of the work of the Committee in the required corporaterecords folder.</li> </ul>
<b>11.</b>	<p><b>Meeting effectiveness review</b></p>

The Committee shall at least once a year, review its own performance, constitution and terms of reference to ensure it is operating at maximum effectiveness and recommend any changes it considers necessary to the Board for approval.

A record of the frequency of attendance by members, quoracy and the frequency of meetings will be maintained. Any areas of concern will be highlighted to the Chair of the Committee.

**12. Review to be conducted by Committee Chair**

**Date Committee established** 1 April 2011

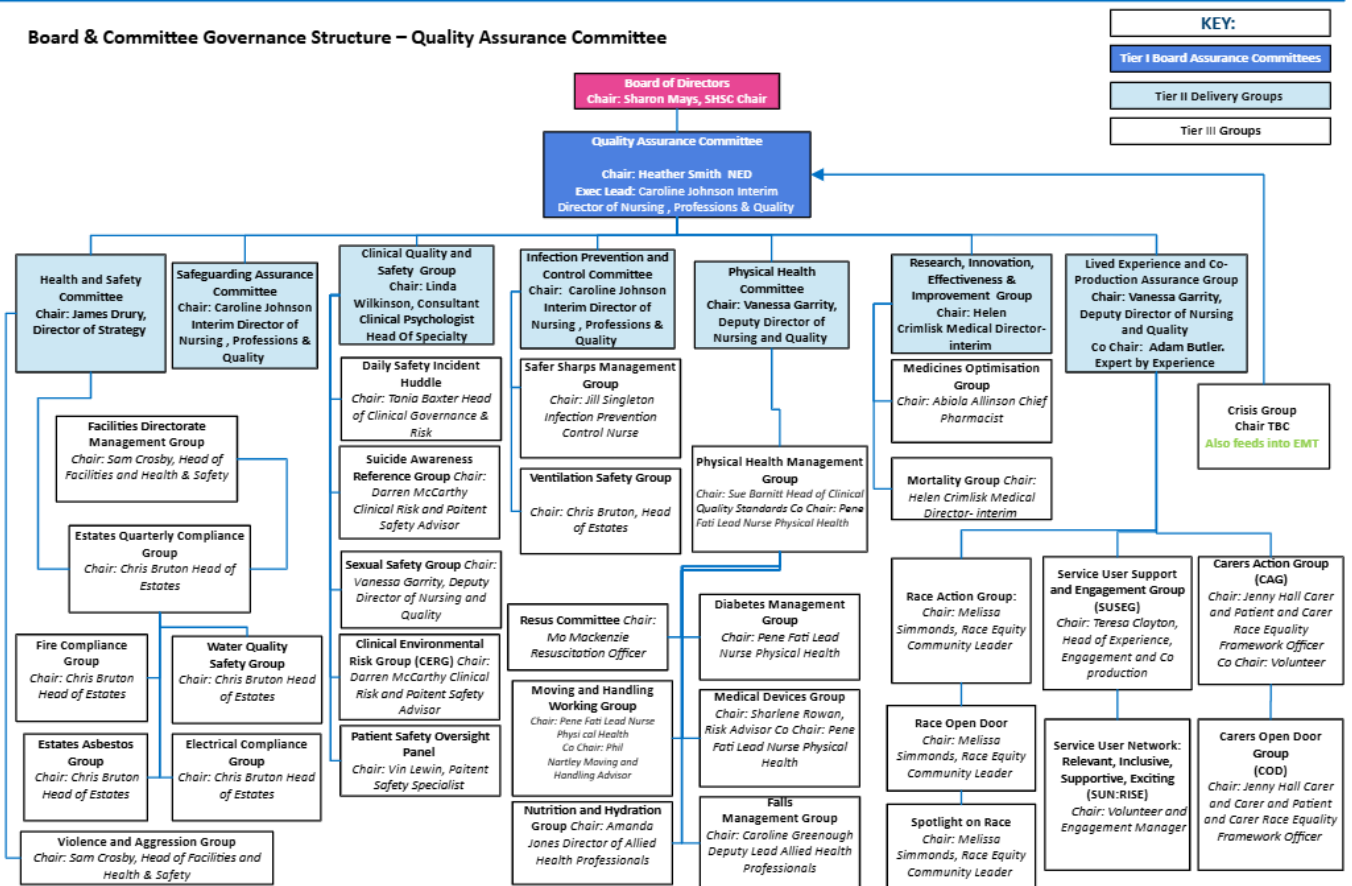
**Terms of Reference to be reviewed** Annually

**Date of last review** May 202~~5~~<sup>4</sup>

**Date of next review** May 202~~5~~<sup>6</sup>

## Sheffield Health and Social Care NHS FT Corporate Governance Structure

### Board & Committee Governance Structure – Quality Assurance Committee



# Finance and Performance Committee Terms of Reference

Document History:	
Version Number:	4.1 4.2
Approved by: (parent Committee/group)	Trust Board
Date approved:	July 2024 July 2025
Name of Committee/Group	Finance and Performance Committee
Type of Committee/Group	Board Assurance Committee reporting to Board of Directors (the "Board")

1.	Purpose of Committee/Group
	<p>The Finance and Performance Committee and ("the Committee") has been established to provide assurance to the Board in consultation with the other Board Committees that adequate and appropriate governance structures, processes and controls are in place throughout the Trust to:</p> <ul style="list-style-type: none"> <li>• Over-arching review of financial risk</li> <li>• Overview of the Trust's financial processes and monitoring returns to NHS England/Improvement, ensuring finances are managed within the allocated resources to deliver an efficient and effective service.</li> <li>• Provide assurance to the Board on the financial controls of the Trust.</li> <li>• Oversee the Trust's accountabilities in regard to data and information, establishing and regularly reviewing policy, procedures, practice and processes are effective, providing assurance to the Board.</li> <li>• Provide assurance of the Trust's compliance with its regulatory and statutory duties pertaining to data and information and the effective governance of data and information within the Trust.</li> <li>• Provide assurance that the performance framework enables the Trust to proactively manage its Quality, Financial and People performance agenda including oversight through committees.</li> <li>• Oversee the strategies for Finance; Estates; Digital Transformation and Sustainability and Green Plan</li> </ul> <p>The Committee shall provide assurance to the Board on the probity of the Trust and support the other Board Committees in the achievement of clinical effectiveness and safe outcome for service users, maintaining positive service users and carer experience and equality and inclusion.</p>

2.	<p><b>Scope</b></p> <p>The scope of the Committee is Trust wide, it will:</p> <ul style="list-style-type: none"> <li>• Review and monitor the systems and processes for the financial activity within the organisation ensuring that decisions are in line with the Trust's overall strategic direction and its financial frameworks, including the Financial Strategy, Treasury Management Policy, Procurement Strategy and the Estates Strategy.</li> <li>• Oversee development, and monitoring of delivery, of the Digital Transformation Strategy</li> <li>• Establish and maintain a performance framework that enables the Trust to proactively manage its, Quality, Financial and Workforce performance agenda including oversight through committees.</li> </ul> <p>In delivering this purpose the remit will be to formulate an annual programme of work.</p>
3.	<p><b>Authority/Accountability</b></p> <p>The Committee is an assurance Committee of the Board of Directors, authorised to establish and delegate powers to sub-committee(s) and work groups. The Committee will oversee the work of those sub-committee(s) and work groups.</p> <p>The Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any member of staff and all members of staff are directed to co-operate with any request made by the Committee.</p> <p>The Committee is authorised by the Board to obtain outside legal or other independent professional advice as required to support it in discharging its duties. The budget for such advice must be within agreed financial constraints.</p> <p>The Committee is authorised to make decisions that are not reserved to the Trust Board. Reference should be made, as appropriate to the Standing Orders and Standing Financial Instructions of the Trust.</p> <p>The following matters must be referred to Board:</p> <ul style="list-style-type: none"> <li>• Where there is significant revenue, capital or cash implications as determined by the Trust's Standing Financial Instructions</li> <li>• Conflict with statutory obligations, or have significant governance implications</li> <li>• Likely to arouse significant public or media interest.</li> </ul>

#### 4. Objectives of Committee/Group

##### Financial Management and Performance

The Committee will:

- Review and provide assurance on the delivery of, the Finance Strategy
- establish and maintain a detailed knowledge of the Trust's overall strategic objectives
- establish and maintain an overview of the Trust's financial risks and ensure the effectiveness and implementation of the controls for financial risks. Provide assurance to the Board that the controls are in place for any financial risks identified
- provide assurance to the Board on the Trust's financial resilience and sustainability through overview of the Trust's annual business priorities and the associated financial plans through the receipt of the Annual Plan,
- supervise the annual budget setting processes and financial information contained in the Annual Plan and provide assurance to the Board on the process
- monitor the Trust's activities in relation to the submission of offers for existing/new business opportunities in line with the agreed growth strategy. Provide regular updates to the Board on the business opportunities being presented to the Committee monitor and provide assurance to the Board on the Trust's affordability, profitability and return on investment of its core business and service developments
- review the most recent monthly finance report prepared for the Board to enable an informed and focussed discussion at the Board meeting, making recommendations and priorities for discussion
- review in detail any major performance variation, in order to obtain assurance on behalf of the Board as to the effectiveness of corrective actions and associated governance arrangements.
- oversee the on-going development of the finance report, to seek assurance that the measures incorporated meet the requirements of external stakeholders and provide assurance to the Board that the Trust's Financial Strategy is being delivered
- monitor and provide assurance to the Board on the Cost Improvement/Cash Releasing Efficiency Savings Programme(s) as well as any agreed Disinvestment Programmes
- review the activity reports in respect of under/over performance against contracted targets. Escalate to the Board any significant variations to contracts.
- review on a regular basis, the Trust's position in respect of contracts and any impact on overall Trust performance and financial stability
- scrutinise details of movement in aged reports, specifically in relation to Losses category 3c (bad debts and claims abandoned) for assurance re the validity of information contained in financial reports
- review, monitor and provide assurance to the Board on the returns to NHS England (as determined by their reporting processes)
- review the Trust national cost collection submission and provide assurance to the Board that the Committee is satisfied with the Trust's costing processes and systems, and that the Trust will submit its national cost collection return in accordance with the guidance, under delegated authority of the Board.
- review National cost collection outcomes & benchmarking (measure of relative efficiency) on publication and provide assurance to the Board on the value for money of services provided

- consider the risks delegated to it via the Board Assurance Framework (BAF) and/or Corporate Risk Register (CRR). The Committee should determine if the appropriate level of risk has been identified, review the effectiveness of the controls in place relevant to the risks, review and challenge the strength of the assurances provided, identify any gaps in control or assurance and ensure that the risk lead identifies appropriate actions to address such gaps. The Committee should provide assurance to the Board on the risks delegated to the Committee and highlight any key areas of concern identified by the Committee.
- act as the forum for financial risk to be discussed, and ensure that where serious concerns are raised, action is taken, and that action plans are carried through to completion, and the reporting loops closed. In doing so, ensuring that there are robust links across directorates to ensure a culture risk management is present throughout the organisation.

### **Capital Management**

The Committee will:

- review on behalf of the Board the strategic five year capital programme and the annual capital budgets and recommend to the Board approval of the documents as appropriate.
- review capital business cases identified within the annual capital budget to ensure that each business case is within the resources approved by the Board and that the business cases comply with the business case standards set by the Trust and outside regulators
- approve capital business cases in accordance with the Trust's Detailed Scheme of Delegation (DSoD)
- provide assurance to the Board on the functioning of the capital programme and associated business cases.

### **Treasury Management**

The Committee will:

- manage and review investment decisions in accordance with the Trust's Treasury Management Policy and Trust Objectives, and ensure safe harbouring of "cash", following the agreed controls and ensuring all investment is risk averse
- review the Trust's Treasury Management Policy and make recommendations to the Board for approval
- review Trust finance applications including loan applications
- provide assurance to the Board on all Treasury Management issues.

### **Investment Appraisal**

The Committee will:

- review and approve the Trust Growth Strategy
- review and approve revenue business cases in accordance with limits in the Trust's DSoD and to make recommendations to the Board on those cases outside of its authority
- review the benefits realisation of business cases and post implementation reviews of business cases it approves to ensure that the standard of business case preparation is consistently high
- review and monitor the Trust's Business and Financial Performance by receiving high level monthly reports from the outputs of the Business Planning Group (BPG)
- provide assurance to the Board on all investment appraisal activity.

### **Digital Strategy**

The Committee will:

- review and approve the Digital Transformation Strategy
- review and provide assurance regarding its implementation.

## Other

The Committee will:

- Review the performance framework that enables the Trust to proactively manage its, Quality, Financial and People performance agenda, increasing triangulation to inform decision making
- review, approve and provide assurance to the Board on the Trust Procurement Strategy
- review, approve and provide assurance to the Board on the Trust Sustainability and Green Plan
- review, approve and provide assurance to the Board on the Trust Estate Strategy monitor and approve expenditure in respect of the Trust's Charitable and Endowment funds ensuring appropriate resource allocation
- review the Trust's Standing Financial Instructions (SFI) and Standing Orders (SO) and where appropriate make recommendations regarding amendments to the Audit Committee for approval by the Board
- receive assurance on legal matters above the assigned threshold in the SFIs and Standing Orders
- notify the Audit and Risk (ARC) Committee of any statutory reporting concerns or identified system weaknesses
- review any matter referred to the Committee by the Board
- prepare and share with the ARC and the Board an Annual Report that outlines the work undertaken by the Committee during the year.

The Committee will uphold the values of the Trust in the work it does. In particular it will look for assurances that these values are being delivered in the Trust, as part of its overall governance role on behalf of the Board.

## 5. Membership

The membership of the Committee will be:

- Three Non-Executive Directors (one of which will be appointed to chair the meetings and one of which will have financial experience)
- Executive Director of Finance (Lead Executive and SIRO)
- Director of Operations
- Director of Strategy

Other Non-Executive Directors / Associate Non-Executive Directors and Executive Directors can attend as desired but will not form part of the permanent membership of this committee unless formally deputising for a committee member.

Membership will be reviewed annually.



6.	<p><b>Attendees</b></p> <p>Meetings of the Committee shall normally be attended by the following or any successor roles:</p> <ul style="list-style-type: none"> <li>• Deputy Director of Finance</li> <li>• <del>Director of Corporate Governance</del> Associate Director of Communications &amp; Corporate Governance</li> <li>• Director of Performance and Delivery</li> <li>• <del>Head of Corporate Assurance</del> counts under successor role for ADCCG</li> <li>• <del>Senior Head of Service</del> Deputy Director of operations</li> <li>• Committee Administrator</li> <li>• Governor observer</li> </ul> <p>The Committee may invite other persons to attend a meeting so as to assist in deliberations. The Chair shall be notified of this prior to the meeting.</p> <p>Other directors or their deputies may be asked to attend meetings or part meetings for discussions on matters relating to their portfolio, if required. The provisions of the Trust's Standing Orders relating to acting up arrangements and joint members will apply to this Committee with respect to decision making authority.</p> <p>The <b>Associate Director of communication and corporate governance</b> (Board Secretary) will provide advice to the Chair and members and ensure that the Committee has the appropriate administrative and secretarial support (an Administrator). A minute taker will also attend all Committee meetings and be stated as in attendance.</p>
7.	<p><b>Chair, Quorum, Attendance and Meetings</b></p> <p><b>Chair</b></p> <p>The Non-Executive Director Chair will preside at all meetings having been approved as the Chair by the Board or appointed as such by the Trust Board Chair. In extraordinary circumstances where the Chair cannot attend, one of the Non-Executive Director members will chair the meeting.</p> <p><b>Quorum</b></p> <p>A quorum will be 3 members and must include 2 Non-Executive Director and 1 Executive Director.</p> <p><del>Deputies may attend, with the agreement of the Chair. This will be by exception; they must be fully briefed and if formally deputising will count towards the quorum.</del></p> <p>If the executive lead is unable to attend, the meeting should be moved. If this is not possible, a deputy may be sent, with the agreement of the Chair. This will be by exception, and they must be fully briefed and if formally deputising will count towards the quorum, even if they are not an executive director.</p> <p>If the Committee is not quorate the meeting may be postponed at the discretion of the Chair. If the meeting does take place and is not quorate no decisions shall be made at that meeting and such matters must be deferred until the next quorate meeting.</p> <p><b>Attendance</b></p> <p>Members are expected to attend all meetings. Apologies must be received by the Administrator in advance of the meetings. All members will be required to attend <b>a minimum</b> of two thirds of all meetings held annually. Members should not be absent for more than two consecutive meetings without the agreement of the Chair.</p>

With the prior agreement of the Chair of the Committee any Committee member may participate remotely provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person but will be recorded as having attended remotely in the minutes and is counted in a quorum and entitled to vote.

### **Meetings**

Where a specific matter is deemed to be of a confidential or commercially sensitive nature the Chair has the authority to restrict attendance at the meeting to members only and to ask all invitees to leave the meeting.

If any member or invitee has an interest, pecuniary or otherwise, in any matter and is present at the meeting at which the matter is under discussion, they will declare that interest as early as possible and shall not participate in the discussions. The Chair will have the power to request that member or invitee to withdraw until its consideration has been completed.

## **8. Frequency of meetings**

### **Frequency**

The Committee will generally meet monthly. Additional meetings can be arranged for specific purposes as necessary, with agreement by the Chair.

If a matter of urgent business arises and an extraordinary meeting is required, this may be convened by the Chair, subject to the agreement of a quorum number of members. Decisions will be subject to achieving quorum attendance.

Where a decision needs to be taken outside the normal cycle of meetings, and where the matter is not deemed by the Chair to require an additional meeting to be called, the decision may be made via e-mail. The preference is for decisions to be taken at meetings. The decisions via e-mail process will be used on an exceptions basis. The process for decision via e-mail will be as follows:

- a) An e-mail setting out the matter for decision will be sent to all members on the same working day. This shall include a statement setting out how the members should signify what their view on the matter is and the deadline for doing so.
- b) Members will generally be given no less than five working days in which to respond.
- c) For a decision to be passed, all of the members must express the same view on the matter.
- d) Where members have comments on the proposed decision or recommendation/s these will be circulated to other Committee/Group members by the Administrator within one working day of receipt.
- e) If any individual member wishes to debate an item proposed for decision via e-mail at a meeting instead they may ask the Chair to arrange an additional meeting or defer the item for decision until the next meeting (such agreement by the Chair not to be unreasonably withheld).
- f) Decisions via e-mail will be reported to the next meeting and the wording of the decision minuted. Any decision made in this manner will be effective from the date of agreement of all of the members and confirmed by email by the Administrator.

## **Notice of meetings**

Meetings shall be called by the Administrator at the request of the Chair or any of its members.

Unless otherwise agreed, notice of each meeting and agenda of items to be discussed, shall be forwarded to each member, any other person required to attend no later than three full working days before the date of the meeting.

Supporting papers shall be sent to members and to other attendees as appropriate, at the same time.

Notices, agendas and supporting papers can be sent in electronic form where the recipient has agreed to receive documents in such a way.

A meeting workplan will be agreed on an annual basis, setting out the main work items to be carried out at each meeting to ensure that adequate time is given to the main objectives of the Committee.

## **9. Minutes and Reporting Arrangements**

The Committee will report to the Board on how it discharges its responsibilities.

The approved minutes of Committee meetings will be formally recorded and submitted to the Board by the Chair of the Committee (supported by the Corporate Governance team).

The Chair of the Committee will draw to the attention of the Board any issues or decisions that require disclosure to the Trust Board, or require executive action via the Alert, Advise Assure (AAA) report.

The Committee will provide an annual report and review of effectiveness to the Board of Directors on how it has met its obligations. Similarly any Tier II groups reporting into the committee will provide AAA reports and an annual report and review of their effectiveness to their Tier I committee.

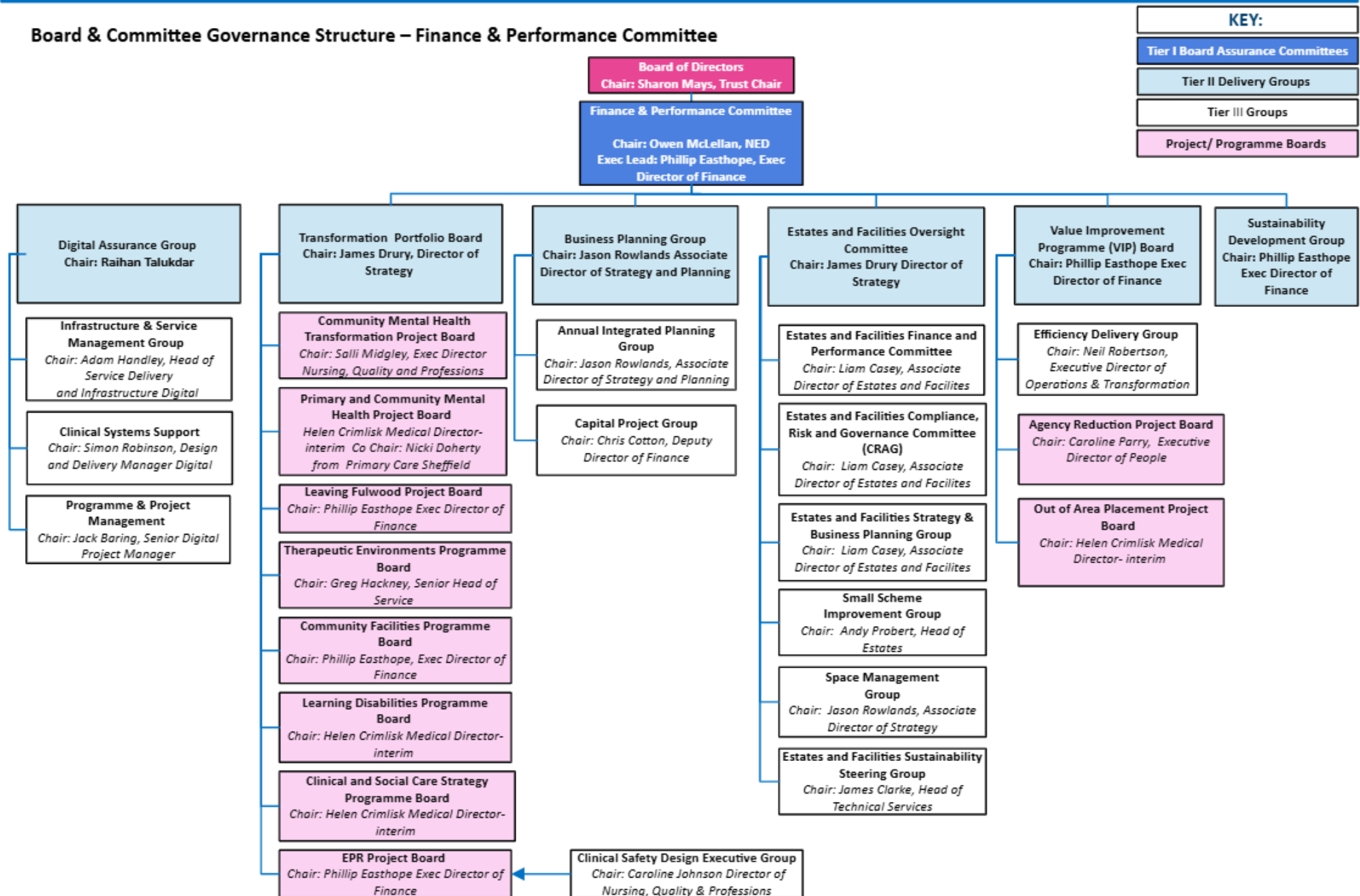
In addition, the Committee will receive thematic 'deep dive' reports or reviews as required to enable greater discussion about specific issues and to facilitate in depth discussions between the members and those staff providing services.

The Board has ultimate responsibility for the effectiveness of its governance below Board. The Board will rely on the work of its committees to provide assurance on the effectiveness of the governance structure.

10.	<b>Administrative Arrangements</b>	
	<p>The Committee will be supported administratively by a nominated Committee Administrator who will:</p> <ul style="list-style-type: none"> <li>• produce a schedule of meetings and maintain the annual work plan for the Committee</li> <li>• prepare the agenda and papers with the Chair, the Executive Lead and the <b>Head of Corporate Assurance</b> <del>Director of Corporate Governance</del> and circulate ideally 5 working days prior to the meeting and no less than 3 working days; except for reasons outlined and to, and agreed with, the Chair;</li> <li>• maintain accurate records of attendance, key discussion points and decisions taken and issue necessary action logs within five full working days of the meeting;</li> <li>• draft minutes, recording where the Committee has delivered its purpose through relevant reports and subsequent discussion, debate and challenge, and where further information is required, for circulation to the meeting Chair within five full working days of the meeting;</li> <li>• organise future meetings; and</li> <li>• file and maintain records of the work of the Committee in the required corporate records folder.</li> </ul>	
11.	<b>Meeting Effectiveness Review</b>	
	<p>The Committee shall at least once a year, review its own performance, constitution and terms of reference to ensure it is operating at maximum effectiveness and recommend any changes it considers necessary to the Board for approval.</p> <p>A record of the frequency of attendance by members, quoracy and the frequency of meetings will be maintained. Any areas of concern will be highlighted to the Chair of the Committee.</p>	
12.	<b>Review to be conducted by Committee/Group Chair</b>	
	<b>Date Committee/Group established</b>	28 July 2008
	<b>Terms of Reference to be reviewed e.g. Annually</b>	The terms of reference of the committee shall be reviewed by the Board when required, but at least annually.
	<b>Date of last review</b>	<b>July 2024 July 2025</b>
	<b>Date of next review</b>	<b>May 2025 2026 at committee and July 2025 2026 for Board approval</b>

# Sheffield Health and Social Care NHS FT Corporate Governance Structure

## Board & Committee Governance Structure – Finance & Performance Committee



# Mental Health Legislation Committee Terms of Reference

Document History:	
Version Number:	5.2
Approved by:	Board of Directors
Date approved:	TBC in July Board of Directors

Name of Committee	Mental Health Legislation Committee
Type of Committee	Board Assurance Committee reporting to Board of Directors (the “Board”)

1.	<b>Purpose of Committee</b> <p>The Mental Health Legislation Committee (the “Committee”) has been established to ensure of effective application and administration of mental health legislation.</p> <p>For the purposes of the Committee, mental health legislation means (but is not exclusive to):</p> <ul style="list-style-type: none"> <li>• The Mental Health Act 1983 (as amended)</li> <li>• The Mental Capacity Act 2005</li> <li>• The Human Rights Act 1998</li> <li>• The Mental Health Units (Use of Force) Act 2018</li> <li>• The Deprivation of Liberty Safeguards (DOLS)</li> </ul> <p>and any associated secondary pieces of legislation eg. Codes of Practice.</p> <p>The Committee shall provide assurance to the Board on the probity of the Trust and support the other Board Committees in the achievement of clinical effectiveness and safe outcomes for service users, maintaining positive service user and carer experience and equality and inclusion.</p>
2.	<b>Scope</b> <p>The scope of the Committee is Trust-wide. It will review and monitor arrangements for systems and processes in place to oversee compliance with mental health legislation following an annual programme of work.</p>
3.	<b>Authority/Accountability</b>

The Committee is an assurance Committee of the Board of Directors, for matters of statutory and regulatory compliance in respect of mental health legislation. It is authorised to establish and delegate powers to subcommittee(s) and work groups. The Committee will oversee the work of those sub-committee(s) and work groups.

The Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Board to establish and delegate powers to sub-committee(s) and work groups. The Committee will oversee the work of those sub-committee(s) and work groups.

The Committee is authorised by the Board to obtain outside legal or other independent professional advice and expertise as required to support it in discharging its duties. The budget for such advice must be within agreed financial constraints.

The Committee will advise the Board of Directors of any investigation being undertaken that instructs professional advisors and update the Board on progress.

The Committee is authorised to make decisions that are not reserved to the Trust Board. Reference should be made, as appropriate to the Standing Orders and Standing Financial Instructions of the Trust.

The following matters that must be referred to the Board:

- Where there is significant revenue, capital or cash implications as determined by the Trust's Standing Financial Instructions
- Conflict with statutory obligations, or have significant governance implications
- Likely to arouse significant public or media interest.

#### 4. Objectives of Committee

The Committee will

Receive assurance of performance, from across the Trust, against Key Performance Indicators which reflect respect for:

- service users' rights.
- compliance with mental health and mental health related legislation and associated codes of practice (e.g. Mental Health Act, Mental Capacity Act, Human Rights Act, Use of Force Act).
- adherence to the regulatory requirements of the CQC.
- the use of restrictive practice within the Trust in particular meeting the aim of the Trust with regards to reducing restrictive practice.
- the performance and activity of the Trust's Associate Mental Health Act Managers.

Assurance oversight will include overseeing the completion and embedding of any necessary corrective action(s), escalating concerns, identifying trends and themes, and overseeing recommendations.

- Ensure the development, implementation, and timely review of policies in relation to Mental Health and Human Rights Legislation (e.g. Mental Health Act, Human Rights Act, Use of Force Act) by receiving updates from the Mental Health Legislation Operational Group (MHLOG) Least Restrictive Practice Oversight Group (LRPROG) ensuring there is adequate engagement and involvement and timely approval by the MHLC for submission of policies through the Policy Governance Group. Ratifying these, following approval by the Policy Governance Group.



- (ii) Receive assurance from the Reducing Restrictive Practice Group on implementing the Trust's aim of reducing restrictive practice.
- (iii) Receive assurance in respect of the performance and functions of the Associate MHA Managers.
- (iv) Ensure that the Trust actively listens to the experiences of the service user, family and carer(s) feedback in the application of mental health legislation so that good practice can be built upon, shared and learning developed.
- (v) Seek assurance that inequalities are recognised where they occur in relation to the use of mental health related legislation and associated policies and that remedial action and reasonable adjustments are utilised to address them.
- (vi) Ensure a coordinated organisational response to the introduction of changes to or new law, regulations, guidance etc
- (vii) Receive assurance that appropriate training and continuous professional development in subjects related to mental health legislation is being made available and accessed (this includes both mandatory and non-mandatory training, along with any significant updates related to mental health legislation).
- (viii) To commission reviews and/or audits of standards and practice as required
- (ix) Seek assurance on effective implementation of action plans developed in response to reviews and audits to improve legislative compliance and service user experience.
- (x) Oversee all risks delegated to the Committee via the Corporate Risk Register (CRR) and Board Assurance Framework (BAF) and will receive assurance risks are being appropriately managed and mitigated. The Committee will receive and oversee the mental health legislation risk register to support onward assurance reporting to the Board of Directors.

The Committee will uphold the values of the Trust in the work it does. In particular it will look for assurances that these values are being delivered in the Trust, as part of its overall governance role on behalf of the Board.

## 5. Membership

The Membership of the Committee will be:

- Three Non-Executive Directors (one of which will be appointed chair).
- Medical Director (Executive Lead)
- Executive Director of Nursing, Professions and Quality
- Associate Director of Communications & Corporate Governance
- ~~Head of Service~~ Deputy Director of Operations

Other Non-Executive Directors / Associate Non-Executive Directors and Executive Directors can attend as desired but will not form part of the committee unless formally deputising for a committee member.

Membership will be reviewed annually.

## 6. Attendees

Meetings will normally be attended by:

- Director of Operations **is this role needed if deputy is in the membership?**
- Clinical Director: Rehabilitation and Specialist Services



- Clinical Director: Community and Acute Services
- Senior Practitioner in Learning Disability Services
- ~~Head of Corporate Assurance~~ taken off and used as deputy for ADCCG?
- Lead Social Worker
- Head of Mental Health Legislation, Human Rights and Chaplaincy
- Human Rights Officer
- Head of Nursing
- Head of Nursing for Least Restrictive Practice
- Head of Safeguarding
- Service user/Carer representative
- Committee Administrator
- Governor Observer

Other directors or their deputies may be asked to attend meetings or part meetings for discussions on matters relating to their portfolio, if required. The provisions of the Trust's Standing Orders relating to acting up arrangements and joint members will apply to this Committee with respect to decision making authority.

The ~~Associate Director of Communications and Corporate Governance~~ ~~Director of Corporate Governance~~ (Board Secretary) will provide advice to the Chair and members to ensure that the Committee has the appropriate administrative and secretarial support (an Administrator). A minute taker will also attend all Committee meetings and be stated as in attendance.

## 7. Chair, Quorum, Attendance and Meetings

### Chair

The Non-Executive Director Chair will preside at all meetings having been approved as the Chair by the Trust Board or appointed as such by the Trust Board Chair. In extraordinary circumstances where the Chair cannot attend, one of the Non-Executive Director members will chair the meeting.

### Quorum

A quorum will be 3 members and must include 2 Non-Executive Directors and 1 Executive Director including the Chair or deputy chair.

~~Deputies may attend, with the agreement of the Chair. This will be by exception; they must be fully briefed and if formally deputising will count towards the quorum.~~

If the executive lead is unable to attend, the meeting should be moved. If this is not possible, a deputy may be sent, with the agreement of the Chair. This will be by exception, and they must be fully briefed and if formally deputising will count towards the quorum, even if they are not an executive director.

If the Committee is not quorate the meeting may be postponed at the discretion of the Chair. If the meeting does take place and is not quorate no decisions shall be made at that meeting and such matters must be deferred until the next quorate meeting.

### Attendance

Members are expected to attend all meetings. Apologies must be received by the Administrator in advance of the meetings. All members will be required to attend **a minimum** of two thirds of all meetings held annually. Members should not be absent for more than two consecutive meetings without the agreement of the Chair.

With the prior agreement of the Chair of the Committee any Committee member may participate remotely provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person but will be recorded as having attended remotely in the minutes and is counted in a quorum and entitled to vote.

**Meetings**

Where a specific matter is deemed to be of a confidential or commercially sensitive nature the Chair has the authority to restrict attendance at the meeting to members only and to ask all invitees to leave the meeting.

If any member or invitee has an interest, pecuniary or otherwise, in any matter and is present at the meeting at which the matter is under discussion, they will declare that interest as early as possible and shall not participate in the discussions. The Chair will have the power to request that member or invitee to withdraw until its consideration has been completed.

**8. Frequency and Notice of Meetings**

### **Frequency**

The Committee will meet quarterly. Additional meetings can be arranged for specific purposes as necessary, with agreement by the Chair.

If a matter of urgent business arises and an extraordinary meeting is required, this may be convened by the Chair, subject to the agreement of a quorum number of members. Decisions will be subject to achieving quorum attendance.

Where a decision needs to be taken outside the normal cycle of meetings, and where the matter is not deemed by the Chair to require an additional meeting to be called, the decision may be made via e-mail. The preference is for decisions to be taken at meetings. The decisions via e-mail process will be used on an exception basis. The process for decision via e-mail will be as follows:

- a) An e-mail setting out the matter for decision will be sent to all members on the same working day. This shall include a statement setting out how the members should signify what their view on the matter is and the deadline for doing so.
- b) Members will generally be given no less than five working days in which to respond.
- c) For a decision to be passed, all of the members must express the same view on the matter.
- d) Where members have comments on the proposed decision or recommendation/s these will be circulated to other Committee members by the Administrator within one working day of receipt.
- e) If any individual member wishes to debate an item proposed for decision via e-mail at a meeting instead they may ask the Chair to arrange an additional meeting or defer the item for decision until the next meeting (such agreement by the Chair not to be unreasonably withheld).
- f) Decisions via e-mail will be reported to the next meeting and the wording of the decision minuted. Any decision made in this manner will be effective from the date of agreement of all of the members and confirmed by email by the Administrator.

### **Notice of meetings**

Meetings shall be called by the Administrator at the request of the Chair or any of its members.

Unless otherwise agreed, notice of each meeting and agenda of items to be discussed, shall be forwarded to each member, any other person required to attend no later than Supporting papers shall be sent to members and to other attendees as appropriate, at the same time.

Notices, agendas and supporting papers can be sent in electronic form where the recipient has agreed to receive documents in such a way.

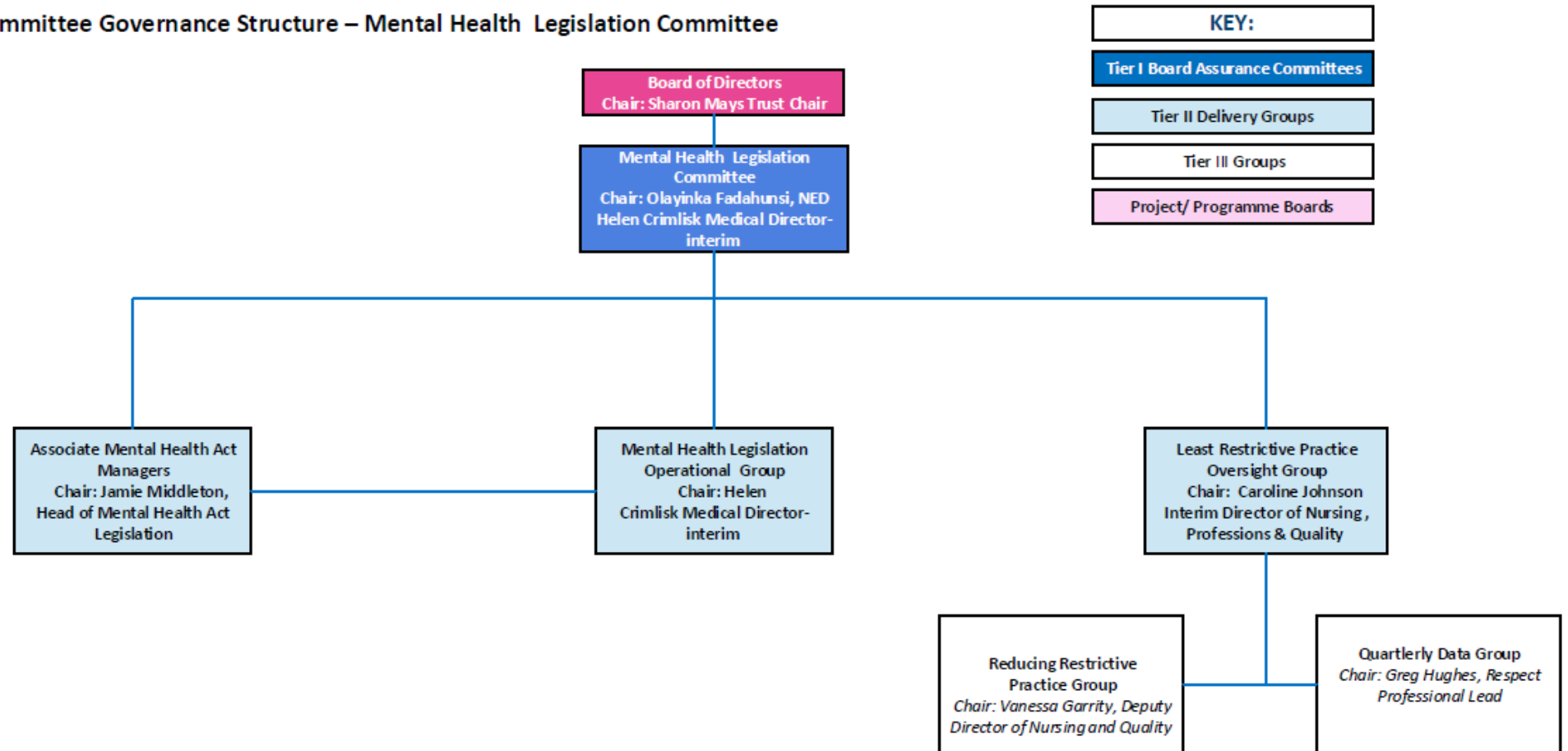
A meeting workplan will be agreed on an annual basis, setting out the main work items to be carried out at each meeting to ensure that adequate time is given to the main objectives of the Committee.

## **9. Minutes and Reporting Arrangements**

	<p>The Committee will report to the Board on how it discharges its responsibilities.</p> <p>The approved minutes of Committee meetings will be formally recorded and submitted to the Board by the Chair of the Committee (supported by the Corporate Governance team).</p> <p>The Chair of the Committee will draw to the attention of the Board any issues or decisions that require disclosure to the Trust Board, or require executive action via the Alert, Advise Assure (AAA) report.</p> <p>The Committee will provide an annual report and review of effectiveness to the Board of Directors on how it has met its obligations. Similarly, any Tier II groups reporting into the committee will provide AAA reports and an annual report and review of their effectiveness to their Tier I committee.</p> <p>In addition, the Committee will receive thematic 'deep dive' reports or reviews as required to enable greater discussion about specific issues and to facilitate in depth discussions between the members and those staff providing services.</p> <p>The Board has ultimate responsibility for the effectiveness of its governance below Board. The Board will rely on the work of its committees to provide assurance on the effectiveness of the governance structure.</p>								
10.	<p><b>Administrative arrangements</b></p> <p>The Committee will be supported by a nominated Administrator who will:</p> <ul style="list-style-type: none"> <li>• produce a schedule of meetings and maintain the annual work plan for the Committee</li> <li>• prepare the agenda and papers with the Chair, the Executive Lead and the <b>Head of Corporate Assurance</b> <del>Director of Corporate Governance</del> and circulate ideally five working days prior to the meeting and no less than 3 working days.</li> <li>• maintain accurate records of attendance, key discussion points and decisions taken and issue necessary action logs within five full working days of the meeting.</li> <li>• draft minutes, recording where the Committee has delivered its purpose through relevant reports and subsequent discussion, debate and challenge, and where further information is required, for circulation to the meeting Chair within five full working days of the meeting.</li> <li>• organise future meetings; and</li> <li>• file and maintain records of the work of the Committee in the required corporate records folder.</li> </ul>								
11.	<p><b>Meeting effectiveness review</b></p> <p>The Committee shall at least once a year, review its own performance, constitution and terms of reference to ensure it is operating at maximum effectiveness and recommend any changes it considers necessary to the Board for approval.</p> <p>A record of the frequency of attendance by members, quoracy and the frequency of meetings will be maintained. Any areas of concern will be highlighted to the Chair of the Committee.</p>								
12.	<p><b>Review to be conducted by Committee Chair</b></p> <table border="1"> <tr> <td><b>Date Committee established</b></td><td>1 April 2021</td></tr> <tr> <td><b>Terms of Reference to be reviewed</b></td><td>Annually</td></tr> <tr> <td><b>Date of last review</b></td><td><b>July 2025</b></td></tr> <tr> <td><b>Date of next review</b></td><td><b>May 2026 at committee and July 2026 for Board approval</b></td></tr> </table>	<b>Date Committee established</b>	1 April 2021	<b>Terms of Reference to be reviewed</b>	Annually	<b>Date of last review</b>	<b>July 2025</b>	<b>Date of next review</b>	<b>May 2026 at committee and July 2026 for Board approval</b>
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# Sheffield Health and Social Care NHS FT Corporate Governance Structure

## Board & Committee Governance Structure – Mental Health Legislation Committee



# Remuneration and Nomination Committee

## Terms of Reference

Document History:	
Version Number:	<u>54.1</u>
Approved by:	Trust Board
Date approved:	<u>24 July 2024</u> TBC
Name of Committee	Remuneration and Nomination Committee
Type of Committee	Committee of the Trust Board of Directors
1.	<b>Purpose of Committee</b> <p>The Remuneration Committee (the 'committee') has been established to:</p> <ul style="list-style-type: none"> <li>be responsible for supporting and approving the recruitment of Executive Directors to Board positions and agreeing their remuneration and other conditions of service.</li> <li>be responsible for considering and actioning any matter relating to the continuation in office of any Executive Director at any time, including the suspension or termination of service of an individual as an employee of our Trust.</li> <li>be responsible for agreeing the remuneration and other conditions of service of other very senior managers outside of Agenda for Change.</li> </ul> <p>In these Terms of Reference, the reference to senior managers relates only to Executive Directors and Very Senior Managers outside of Agenda for Change (VSM).</p>
2.	<b>Scope</b> <p>The scope of the committee is limited to remuneration and nomination requirements related to the Executive Directors and Very Senior Managers.</p>
3.	<b>Authority / Accountability</b> <p>The Remuneration and Nomination Committee is constituted as a standing committee of the Trust Board of Directors (the Board). Its constitution and terms of reference shall be as set out below, subject to amendments at future Trust Board meetings.</p> <p>The committee is authorised by the Board to act within its terms of reference. All members of staff are directed to cooperate with any request made by the committee.</p> <p>The committee is authorised by the Board to instruct professional advisors and request the attendance of individuals and authorities from outside our Trust with relevant experience and expertise if it considers this necessary or expedient to the exercising of its functions.</p> <p>The committee is authorised to obtain such internal information as is necessary and expedient to the fulfilment of its functions.</p>
4.	<b>Objectives of the Committee</b> <b>Appointments and nomination role</b> <p>The committee will:</p>

	<ol style="list-style-type: none"> <li>I. in consultation with the Chief Executive annually review the structure, size and composition (including the skills, knowledge, experience and diversity) of the Executive Team, making use of output from the Board annual self-assessment process as appropriate.</li> <li>II. give full consideration to and make plans for succession planning for the Chief Executive and, on the recommendation of the Chief Executive, for the other Executive Directors as part of any review of skills and experience required across the Board.</li> <li>III. identify and nominate for approval by the council of governors, appointment to the role of Chief Executive.</li> <li>IV. seek the opinion of NHS England where the Committee intends to make new appointments or increase pay of existing staff to £150,000 or above, in accordance with NHS England national guidance on pay for VSMs in NHS Trusts and Foundation Trusts (March 2018).</li> <li>V. be assured that when a vacancy is identified, the balance of skills, knowledge and experience required on the Board is taken into consideration, including diversity.</li> <li>VI. consider and action any matter relating to the continuation in office of any Executive Director at any time, including the suspension or termination of service of an individual as an employee of our Trust.</li> <li>VII. comply with the legal duties set out in the Equality Act 2010 and related Regulations, in particular the duty to have due regard to preventing discrimination and promoting equality of opportunity where people share specific characteristics.</li> <li>VIII. consider where appropriate the use of positive action in recruitment and promotion in line with section 158 and section 159 of the Equality Act 2010.</li> <li>IX. ensure appropriate processes are followed for the recruitment and appointment of Executive Directors.</li> <li>X. annually consider the objectives and performance of Executive Directors led by the Chief Executive and, in the case of the Chief Executive, the Chair will lead to ensure they are in line with our Trust's objectives and values.</li> </ol> <p>The Committee will uphold the values of the Trust in the work it does. In particular it will look for assurances that these values are being delivered in the Trust, as part of its overall governance role on behalf of the Board.</p>
	<p><b>Remuneration Role</b></p> <p>The committee will:</p> <ol style="list-style-type: none"> <li>I. establish and keep under review a remuneration policy in respect of Executive Directors of the Board and any other very senior managers on locally determined pay.</li> <li>II. consult with the Chair and/or Chief Executive about proposals relating to the remuneration of the other Directors and/or senior managers on locally determined pay.</li> <li>III. adhere to all relevant laws, regulations and policy in all aspects, including but not limited to, determining levels of remuneration that are sufficient to attract, maintain and motivate executive directors while ensuring value for money.</li> <li>IV. in line with policy and relevant guidance, advise on and oversee contractual arrangements for Executive Directors including, but not limited to, provision of other benefits including</li> </ol>

	<p>pension and car allowances, payable expenses, any performance related pay where applicable, compensation, redundancy or termination payments.</p> <p>V. use national guidance and market benchmarking analysis in the annual determination of remuneration of Executive Directors of the Board and or Very Senior Managers on locally determined pay.</p> <p>VI. consider development of any performance related pay frameworks as and when required [note that our Trust doesn't currently have a PRF in place].</p>
<b>5.</b>	<b>Membership</b>
	<p>The committee should be composed of Non-Executive Directors and the Trust Board Chair.</p> <p>When appointing or removing the Chief Executive, the committee shall be the committee that is described in Schedule 7, 17(3) of the National Health Service Act 2006 as amended by the Health and Social Care Act 2012 (the Act) (that is all the Non-Executive Directors of the Board).</p> <p>When appointing or removing other Executive Directors of the Board the committee shall be the committee that is described in Schedule 7, 17(4) of the Act (that is the Trust Board Chair and Non-Executive Directors with the Chief Executive in attendance).</p>
<b>6.</b>	<b>Attendees</b>
	<p>Only members of the committee, detailed above, have the right to attend committee meetings.</p> <p>At the invitation of the committee, meetings shall normally also be attended by the following or their successor roles:</p> <ul style="list-style-type: none"> <li>• the Executive Director of People</li> <li>• the <a href="#">Associate</a> Director of <a href="#">Communications and</a> Corporate Governance and</li> <li>• any Associate Non-Executive Directors</li> <li>• with the Chief Executive an attendee by invitation for specific agenda items (as detailed above).</li> </ul> <p>Other persons may be invited by the committee to attend a meeting so as to assist in deliberations. Any non-member, will be asked to leave the meeting should their own conditions of employment be the subject of discussion. Where Executive Directors of the Board or senior management are involved in advising or supporting the Remuneration and Nomination Committee, care should be taken to recognise and avoid conflicts of interest.</p> <p>No Director should be involved in deciding his or her own remuneration.</p>
<b>7.</b>	<b>Chair, Quorum, Attendance and Meetings</b>
	<p><b>Chair</b> The Trust Board Chair shall Chair the committee.</p> <p><b>Quorum</b></p> <p>The committee will be quorate when three Non-Executive Directors (voting) are present at the meeting. The Trust Board Chair (Chair of the Committee), is also a Non-Executive Director for the purposes of quoracy. The Trust Board Vice Chair or another Non-Executive Director may be required to Chair this committee in the absence of the Trust Board Chair.</p> <p><b>Attendance</b></p>



Members are expected to attend all meetings. Apologies must be received by the Administrator in advance of the meetings. All members will be required to attend a minimum of two thirds of all meetings held annually. Members should not be absent for more than two consecutive meetings without the agreement of the Chair.

With the prior agreement of the Chair of the Committee any Committee member may participate remotely provided that each person is able to hear and speak. A person participating in this way is deemed to be present in person but will be recorded as having attended remotely in the minutes and is counted in a quorum and entitled to vote.

The meeting is deemed to take place where the largest group of those participating is assembled, or if there is no such group where the Chair of the meeting is located.

### **Meetings**

Meetings shall be called as required, but at least once in each financial year.

A formal agenda and supporting papers will be forwarded to all members, and those in attendance where appropriate, three working days prior to the date of the meeting wherever possible.

The Executive Director of People will coordinate support to the committee and forward planning and will liaise with the Trust Board Chair (Committee Chair), and the Director of Corporate Governance, to draw up the agendas.

The committee will draw up an annual programme of those areas of its remit that may be planned and will undertake an annual review of the effectiveness of the committee in relation to fulfilling its terms of reference and provide reports to the board as required on decisions made.

Where a specific matter is deemed to be of a confidential nature and not appropriate for attendees to the meeting to be present, the Chair has the authority to restrict attendance to the meeting to members only and to ask all invitees to leave the meeting.

If any member or invitee has an interest, pecuniary or otherwise, in any matter and is present at the meeting at which the matter is under discussion, they will declare that interest as early as possible and shall not participate in the discussions. The Chair will have the power to request that member to withdraw until its consideration is completed.

## **8. Minutes and Reporting Arrangements**

- The committee shall receive and agree a description of the work of the committee, its policies and all Executive Director of the Board emoluments in order that these are accurately reported in the required format in our Trust's Annual Report and Accounts
- Where remuneration consultants are appointed, a statement should be made available as to whether they have any other connection with our Trust.

The approved minutes of Committee meetings will be formally recorded and submitted to the Board by the Chair of the Committee (supported by the Corporate Governance team).

The Chair of the Committee will draw to the attention of the Board any issues or decisions that require disclosure to the Trust Board, or require executive action via the Alert, Advise Assure (AAA) report.

The Committee will provide an annual report and review of effectiveness to the Board of Directors on how it has met its obligations.

There are no Tier II groups reporting into this committee.

9.	<b>Administrative arrangements</b>	
	<p>The committee will be supported by a nominated Administrator who will:</p> <ul style="list-style-type: none"> <li>• produce a schedule of meetings and maintain the annual workplan for the committee.</li> <li>• prepare the agenda and papers with the Chair and Executive Lead and circulate five working days in advance of the meeting wherever possible.</li> <li>• prepare the agenda and papers with the Chair and circulate ideally 5 working days prior to the meeting and no less than 3 working days except for reasons outlined to, and agreed with, the Chair.</li> <li>• maintain accurate records of attendance, key discussion points and decisions taken and issue necessary action logs within five working days of the meeting.</li> <li>• draft minutes, recording where the committee has delivered its purpose through relevant reports and subsequent discussion, debate and challenge, and where further information is required, for circulation to the meeting Chair within five working days of the meeting.</li> <li>• organise future meetings, and</li> <li>• file and maintain records of the work of the committee in the required corporate records folder.</li> </ul>	
10.	<b>Meeting effectiveness review</b>	
	<p>The committee shall at least once a year, review its own performance and terms of reference to ensure it is operating to maximum effectiveness and recommend any changes it considers necessary to the Board for approval.</p> <p>The committee shall undertake appropriate and timely training, both in the form of an induction programme for new members and on an ongoing basis for all members.</p> <p>A record of frequency of attendance by members, quoracy and frequency of meetings will be maintained. Any areas of concern will be highlighted to the Chair of the committee.</p>	
11.	<b>Review to be conducted by Committee Chair (Trust Board Chair)</b>	
	<b>Date Committee established</b>	2016
	<b>Terms of Reference to be reviewed</b>	Annually
	<b>Date of last review</b>	<del>July 2024</del> April/May 2025
	<b>Date of next review</b>	April/May 202 <del>5</del> <sup>6</sup> at committee and July 202 <del>5</del> <sup>6</sup> for Board approval

	<p>relevant reports and subsequent discussion, debate and challenge, and where further information is required, for circulation to the meeting Chair within 5 full working days of the meeting;</p> <ul style="list-style-type: none"> <li>organise future meetings; and</li> <li>file and maintain records of the work of the Committee in the required corporate records folder.</li> </ul>								
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