



### Council of Governors Item number: 7 Date: 25 February 2025

Private/ public paper:	Public									
Report Title:	Board Update Report from the meeting held in November 2024 and January 2025									
Author(s)	Sharon Mays, Chair									
Accountable Director:	Non-Executive Directors - Anne Dray; Olayinka Monisola Fadahunsi-Oluwole; Owen McLellan; Heather Smith									
	Associate Non-Executive Director, Brendan Stone									
	Dawn Pearson, associate director of communications and corporate governance									
Presented by:	Dawn Pearson, associate director of communications and corporate governance									
Vision and values:	The Trust vision is to ensure we work together for service users. Good Governance supports the <b>commitment to quality</b> , ensuring we <b>work together</b> to <b>improve services</b> and <b>deliver outstanding care</b> .									
Purpose and key actions:  Executive summary:	Stories heard by the Board for both November 2024 and January 2025. This includes a story on RIO implementation in older adult services									
	<ul> <li>and our approach to supporting carers.</li> <li>2. An update from the Chair</li> <li>3. An update from the Chief Executive report.</li> </ul>									
	4. The latest finance update.									
	<ul> <li>Updates on providing outstanding care which includes:         <ul> <li>Quality Assurance Report</li> <li>Patient Safety and Learning Report – Quarter 2 2024/25</li> <li>Lived Experience Report</li> <li>Reducing Restrictive Interventions (Use of Force) Strategy Workstreams 2025 – 2028</li> </ul> </li> </ul>									

- 6. Updates on effective use of resources which includes:
  - ✓ Sustainability and Green Plan Strategy update 2025- 2028
- 7. Details of other key reports received by Board
- 8. Approved documents and publications
  - ✓ Health inequalities statement 2023/24
  - ✓ Annual equality and human rights report for publication.
- Issues discussed at confidential Board.
- 10. Other matters for information:
  - ✓ Fair and Healthy Sheffield plan
  - ✓ Shaping our culture: values, behaviours and communications
- 11. Alert, Advise Assure reports for all committees:
  - ✓ Quality and Assurance Committee –from December 2024 and January 2025
  - ✓ People Committee –from January 2025
  - ✓ Finance and Performance Committee from December 2024 and January 2025
  - ✓ Audit and Risk Committee from January 2025
  - ✓ Mental Health Legislation Committee December 2024

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					
Ensuring our services are inclusive	Yes	X	No					

### What is the contribution to the delivery of standards, legal obligations and/or wider system and partnership working.

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:

- Constitution (including Standing Orders for practice and procedures of the Board of Directors and the Council of Governors);
- The Accountable Officer Memorandum.
- The Codes of Conduct.
- Standing Financial Instructions as a framework for financial governance,
- Scheme of Reservation and Delegation which describe the powers reserved to and delegated by the Board

These documents together provide a regulatory framework for the business conduct of the Foundation Trust

BAF and corporate risk/s:	The update relates to all Board Assurance Frameworks (BAF) and all					
	corporate risks.					
Any background papers/	The <b>report is a standing item at all COG meetings</b> . The last report which					
items previously	covered an update from both July and September 2024 Board was presented					
considered:	to the CoG at the meeting on 16 October 2024.					
Recommendation:	Council of Governors are asked to:					
	Receive and note the information and update from Board.					
	<ul> <li>Identify and confirm if anything further is required for future reporting.</li> </ul>					

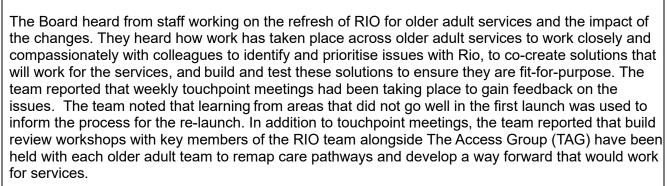
# Board update report to Council of Governors (COG) January 2025

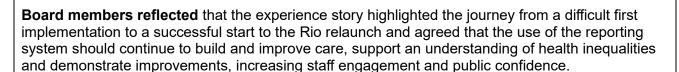
## Updates from the Board of directors meeting dated November 2024 and January 2025.

Key: How each item relates to our strategic priorities											
Effective use of Resources		Transformation – Changing things that make a difference		Delivering outstanding care		Ensuring our services are inclusive					
		make a difference		Garo		/Partnerships					
						/Great Place to Work					

#### 1. Listening to service users/carers and staff

## 1.1 November 2024 story: Implementing RIO (new electronic patient record) in older adult services.





#### 1.2 January 2025 story: Supporting carers.

Jenny Hall, Carer lead introduced the current work on the triangle of care and an update on the delivery of the carers strategy. She explained how pivotal the 'Carers Open Door' and the carer voice has been in the development of this work, noting that the carers open door is one way in getting the carer voice in the conversation.

Chris Molloy, co-chair of the carers open door, talked about his experiences of being a carer in the Trust, and the collective things that are important to carers from the group. He highlighted some examples of his experiences and the importance of carers being heard, including the issues of consent and confidentiality for carers.

The links to other items on the Board agenda were the patient safety and learning report, the lived experience report, which also provides updates on the work delivered on the carer's strategy.

**Board members commented** on the excellent work taking place and valued the inspirational reflections from Chris where he highlighted his own lived experience. The story set out the important context of this work and how we value and support carers, with a focus on staff training, identification of carers and support to all carers to ensure they too maintain their own health and wellbeing.









#### 2. Chairs report

The Chair provided an update noting the following key matters in **November 2024**:





- Caroline Johnson, executive director of nursing, quality and professions, and Dawn Pearson, associate director of communications and corporate governance were welcomed to their new roles. Deborah Lawrenson and Salli Midgley were thanked for their contributions to the Trust and best wishes for the future were noted.
- New Governors were welcomed to their first Council of Governors meeting in October, and it
  was noted that Board members have been invited to attend to an extra-ordinary Council of
  Governors meeting and development session on 4 December to provide a further
  opportunity to get to know each other better, to provide an update and opportunity to provide
  views on the 10-year NHS plan.
- The Chair of the South Yorkshire Integrated Care Board visited the 'Decisions Unit' in November to see a successful crisis service in action.
- The Trust sponsored the Sheffield Youth Awards which celebrated outstanding young people in Sheffield who are making a real difference in their communities took place in November 2024.
- The Trust's peer support workers were represented at the South Yorkshire peer support
  worker event which was a regional celebration and learning event where three of the SHSC
  team were nominated for the NHS peer worker of the year award.
- October was black history month and the ninth annual working together conference was successfully organised by the equality and diversity team and ethnically diverse staff network group with excellent attendance and with participation from the Chair and Chief Executive.
- The Chair who is part of the NHS providers board attended the NHS providers conference and contributed to a video recording for the department for health and social care to promote the 10-year health plan online portal.

The Chair provided an update noting the following key matters in **January 2025**:

- Neil Robertson, director of operations will be leaving after 4 years at the Trust for a secondment to the NHS England (NHSE) regional office. He has played an integral role in our journey of improvement, and his contributions will be greatly missed.
- Gulnar Akhtar, interim director of performance and delivery has joined the Board NHSE
- Dr Helen Crimlisk has been awarded the title of honorary professor from the University of Sheffield
- The Chair has taken on the role as vice-chair of Sheffield Chair's group (part of the Sheffield Health and Care Partnership) from December 2024. Further updates on systems and partnerships will be discussed at both Board sessions
- The Trust held a 'Charathon' on 20 December, and members of the board were involved which raised £400 for the Sheffield Hospitals charity.
- In November, two delegates from Human Rights Watch visited our services to learn from the innovative approaches we are taking
- The Shine awards 2025 celebrating and recognising each other's work are taking place in February and over 260 nominations have been received.

#### 3. Update on Board Chief Executive (CE) report

The CE report set out how nationally we have seen an **increase in need and demand for urgent**, **emergency and crisis services** which is also reflected locally and in the Trust position. Notable national policy direction and developments **continue to focus on devolution** and greater autonomy for mayoral combined authorities and deepening relationships through Integrated care partnerships. A continued **focus on reform of public services**, including mental health and the NHS role in supporting recovery of our economy and supporting people to stay well in work and/or



secure employment.

The report set out how colleagues across the Trust have continued to deliver care and services, with increased pressure on inpatient services and a **significant increase and deterioration in our out of area bed position**. There is a significant amount of work both internally and in partnership with partners in place to improve flow and discharge, this will need continued focus in the coming months. We have also **continued to address waits** and **deliver our strategic priorities** and work with partners across the region through the Integrated care system.

#### 4. Finance position and value improvement as of January 2025

At month 8, the **year-to-date deficit position of £5.331m is £0.524m worse than planned** (M7 £0.734m worse). To achieve the planned deficit of £6.514m, the forecast includes additional mitigation/savings required of £0.9m.



Out of area spend is the main driver for the deterioration of the financial position, the majority of the year to date overspend is offset by non-recurrent underspends as a result of vacancies and reductions in non-pay spend. With current numbers of out of area bed usage in December it is expected that the out of area forecast will increase at month 9 and further mitigations will be required.



As highlighted previously the adjusted plan includes the non-recurrent deficit funding of £5.9m, it is expected that this will have to be returned if the system plan is not achieved.

Cash is higher than planned due to receiving 8/12ths of the non-recurrent deficit funding and the pausing of the Capital program, this is partial offset with not receiving the Fulwood receipt and aged debts being higher throughout the year compared to plan.

Value improvement and recovery plans totalling £9.5m have been developed, the current forecast for expected delivery is £5.8m. In line with the current forecast included in the reporting is fortuitous non-recurrent savings from vacancies and some of the additional mitigations to meet the planned efficiency savings.

At an organisation view, the medics pay is the largest driver behind the pay overspend as other professions have vacancies in some areas offsetting areas with overspending. The value for medics pay is adjusted for offsetting income including pay award. In 2023/24 the medics overspend was £2.1m. Further work is continuing in other areas to feed into the 2025/26 planning process.

**Aged Debt has increased in the last year** which is having a negative impact on the Cash balance, the comparator used is the average of April-November 2023 as the outstanding debt increased from December 2023. The amount outstanding has reduced from £3.6m to £2.7m.

#### 5. Delivering outstanding care Board reports

#### 5.1 November:

• Mortality quarterly report: Quarter 2 which outlined the reporting on mortality data. All deaths reported by staff in quarter 2 are in relation to people living in community settings and the majority are older people with a diagnosis of dementia and conditions related to older age. The Board received an update via the alert, advise, assure report from QAC where it was noted that due to backlogs in LEDER reporting at the Local Authority there will be more information on this coming through in future reports.



• **Guardian of safe working report: Quarter 2** The guardian of safe working and consultant liaison psychiatrist presented the quarterly report which provides assurance that trainee doctors are working safe hours and that exception reports are reaching a timely and satisfactory resolution.

#### 5.2 January:

#### Quality Assurance Report

During 2024 the Quality team had a change of leadership team and have remained focused on implementing the Quality Strategy 2022-26. Steady progress has been made in achieving the

milestones set out in the strategy, but a key component, the Quality Management System (QMS), will not be fully developed until the new Electronic Patient Record system (Rio) is implemented in March 2025. Progress is now being made, quality, culture and care visits which had been affected by staffing challenges. All visits have been planned and scheduled until the end of 2025. An improvement plan is in place to increase the numbers and quality of service user and care feedback.

There have been several positive quality improvements impacts during this period including the development of RIO documentation, audits via Ulysess and the city-wide collaborative safety plan launch

#### • Patient Safety and Learning Report - Quarter 2 2024/25

The Board received assurance that there is a robust process of reviewing incidents with the overall number of incidents reported remaining stable. 88% of all incidents reported were in the no harm or low harm categories of actual impact and this is an indication that the Trust has a positive reporting culture. A learning and improvement group will be established during quarter 4 of 2024-2025 to ensure that improvement programmes are aligned with themes emerging from incidents, complaints, freedom to speak up and safeguarding processes The Board noted that this group will support with providing assurance on the impact of learning from incidents and they recommended using benchmarking data with other Trusts to support the improvement work.

#### • Lived Experience Report

The Board heard that feedback from friends and family test (FFT) continues to be below the average and there is also an absence of collation of feedback collected across services, which has led to service users not knowing the impact or value of this feedback. The Board were assured that plans such as improved communication and visibility with community services and increased promotion of the QR code as a method for giving feedback are in place to address to address this. In addition, work is taking place across the organisation in relation to the communications and engagement strategy which will strengthen engagement, experience and peer support work undertaken within the Trust.

• Reducing Restrictive Interventions (Use of Force) Strategy Workstreams 2025 – 2028
The Board received an update on the approach to co-produce the Least Restrictive Practice
(Use of Force) plan for 2025-2028. They approved the updated actions within the existing
workstreams and noted that the refreshed strategy document will be presented to the Board of
Directors in March 2025.

#### 6. Effective use of resources Board items

#### 6.1 Sustainability and Green Plan Strategy 2025- 2028: January

The Board to supported the Trust refresh of the green plan, reflecting the latest guidance and evidence in line with national ambitions to reduce NHS emissions while improving population health and efficiencies. Greener NHS (GNHS) have produced green plan refresh guidance. This was due for publication Autumn 2024 but has been delayed and it yet to be published. The Sustainable Development Group took the decision to continue with a proposed plan to refresh the SHSC green plan ready for Board review in January 2025, despite not having oversight of the GNHS refresh guidance.

#### 7. Other key reports received at Board included:

#### 7.1 Integrated Performance and Quality Report (IPQR): November and January

From the regular report received at the Board key areas drawn out were around work in place to look at long term sickness; ongoing challenges with some areas of mandatory training; ongoing work to improve recording of protected characteristics; progress with recovery plans for areas such as out of area usage and key cost drivers for delivery of the finance plan. These resonated with other reports received at the Board.





#### 7.2 Systems and partnerships update

In **November** the update focus was on:

• Planning for the 25/26 year linked to the forthcoming ten-year plan for health.

- The provider collaborative and the positive progress with the work on productivity, a key component of the wider South Yorkshire system efficiency work.
- Progress with the development of joint committee arrangements for eating disorders between the partners in the South Yorkshire Mental Health Learning Disability Autism (MHLDA) provider collaborative.
- Adult secure mental health services provided at Cheswold Park hospital in Doncaster transferred to Southwest Yorkshire Partnership NHS Foundation Trust.
- The local authority leading on implementing the Sheffield city goals which will support the Trust strategy refresh.
- The system leadership executive has established a system efficiency and financial recovery board (SEFRB).

#### In **January** the update focus was on:

- The South Yorkshire Integrated Care System, including continued work towards meeting our collective financial plans.
- The South Yorkshire MHLDA Provider Collaborative, through which we seek to improve productivity and transform care.
- The South Yorkshire and Bassetlaw Specialised Commissioning partnership, which increasingly aligns through the Provider Collaborative, including in the case of the Eating Disorders Joint Committee.
- The Sheffield Health and Care Partnership, through which we align and improve local service delivery, including improving flow and discharge planning.
- The Sheffield Health and Wellbeing Board, through which we contribute to addressing the determinants of health and tackling inequalities.

## **7.3 The Transformation Portfolio updates for November and January** providing details on progress with our Transformation programmes.

- Both meetings provided an update on Fulwood, changes to the contractual arrangement for the sale of the Fulwood site which had been agreed by the Board of Directors.
- The EPR programme Board continue to report a green rating.
- The learning disabilities programme staff consultation has been completed and recruitment commenced.
- The community mental health team (CMHT) programme has moved into the post implementation review stage focusing on monitoring outcome measures, benefits realisation and determining an approach to continuous improvement to sustain and improve the new service.
- Phase 1 of the medical model for the primary care mental health team (PCMHT) has been implemented.
- Transformation portfolio Board membership has changed.
- The Gleadless and Heeley neighbourhood mental health centre pilot was approved by the transformation board for inclusion in the portfolio and reported at Board in November. Lived Experience roles and Programme Director have all been recruited
- The older adult's improvement programme will be included in the next reporting cycle. Since this time, it has moved from Start Up into Discovery Phase. It is focusing on memory assessment services and the dementia pathway initially.
- The Therapeutic Environments programme has secured £2.3m capital funding. The improvement work on Maple Ward has commenced and the door replacements on G1 and Endcliffe wards to commence.

#### 7.4 Operational plan 2024/25 progress update in November

An update on progress with the operational plan and strategic priorities for the Board to take assurance, which sets out:

- The waiting lists and waiting well quality improvement (QI) collaborative is progressing well
- The delivery of our patient carer race equality framework (PCREF) continues to progress well, and our delivery plan is now in place.
- The transformation programmes for community mental health and learning disability services are progressing
- The financial deficit position is worse than planned and the underlying position remains highly challenged
- The communications aspect of the communications and engagement draft strategy has been

refreshed and updated, a draft has been presented to EMT and further work is taking place to develop the engagement approach

- 7.5 Clinical and social care (2021-2026) strategy annual review updates and assurance regarding the progress with the implementation of the clinical and social care strategy:
- The strategy is part of a core five-year plan to increase quality whilst reducing inequalities across the Trust and was coproduced with extensive involvement from service users, carers, colleagues in SHSC and partners across Sheffield.
- The person centred workstream has closed, in terms of developing its outputs but will continue to be embedded through business as usual (BAU)
- Development of a patient facing app, which will allow the completion of patient reported outcome measures (PROMS) by service users which integrate with RIO is taking place.
- 7.6 Emergency preparedness resilience response (EPRR) assurance framework 24-25 **submission** and update of the self-assessment against core standards:
- the self-assessment against the core standards indicates that the Trust will achieve a compliance of 74%.
- A check and challenge process has taken place with the chief operating officer from the integrated care board (ICB) during which positive feedback was received on the progress made.
- A few minor amendments were made and resubmitted, the results should be received in the following few weeks.
- An action plan will be put together in relation to the remaining compliance areas for delivery by October 2025, and which will be reported through the audit and risk committee.
- 7.7 The Board received and approved updates on our Board Assurance Framework (BAF) for 2024/25 which provides oversight of our highest strategic risks and the corporate risk register for January 2025 which provides an update on the organisational risks.
  - 8. The Board approved the following documents for publication on our website
  - 8.1 Health inequalities statement 2023/24: The health inequalities statement is a legal requirement of all Trusts and Foundation Trusts, and integrated care boards (ICB) to complete on an annual basis and the first draft of report was presented for discussion at the Board development session in October 2024. The Board noted the health inequalities board self-assessment is aligned to the work taking place on the Trust strategy refresh and approved the publication of the health inequalities statement at the meeting in November 2024.
  - 8.2 The Board were assured that the organisation is responding to the statutory duties of the Equality Act and approved the annual equality and human rights report for publication.
  - 9. Key issues discussed in the Board confidential session
- Electronic Patient Record RIO updates on progress are received at each Board meeting. The programme remains on track to meet our milestones in 2025, and engagement is taking place with our staff to support them to be ready through training. The expected go live date is March 2025.
- Updates on **systems and partnership work** which is currently commercial in confidence.
- Updates on our complaints, serious incidents, safeguarding, CQC enquiries, claims, inquests and employment issues are received at each meeting.

#### 10. Other matters for information:

#### 10.1 Fair and Healthy Sheffield plan

The fair and healthy Sheffield plan is a joint plan developed by the Sheffield health and wellbeing board of which the Trust is an active member. The plan is based on the principles established by Sir Michael Marmot which have been successfully adopted by other cities to make a tangible and sustainable difference to equity and outcomes. In the first year (2025/26) and the remainder of (2024/25) it is proposed that the areas in which the Trust contribute to the delivery of the fair and













healthy Sheffield plan are the following three of the eight building blocks:

- Tackle racism and discrimination
- Ensure fair access to quality NHS services and social care services
- Address the climate and environment crisis

#### 10.2 Shaping our culture: values, behaviours and communications

Over the summer the organisational development team offered a range of ways for staff and governors to get involved in a conversation about how we want to live our values. This started with an interactive event which has been followed by options to join open teams' sessions, in person sessions and to fill in individual feedback. An update was received in November and a presentation in January on the outcome of all this work.

The work on our values is a response to what staff and service uses have told the Trust. Staff and governors were asked to be involved in shaping our culture through developing a shared understanding of our values and how we behave and how we communicate. The aim was to engage every staff member and ensure every team has a conversation. The next steps will include setting up the new values delivery group, who will oversee the outcomes and action that comes from this.

#### 11. Alert - Advise - Assure (AAA) Committee reports

The reports from non-executive Chairs of each committee are appended.







