Board of Directors - Public

SUMMARY	Meeting Date:	23 March 2022
	Agenda Item:	06

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

Recommendations
The Board are asked to consider our response to the Ukraine conflict and any other action we could or should be taking as a leadership team. The Board are asked to contribute any further reflections on our development time where we discussed our staff feedback, bearing in mind we are not able to share content of this year's staff survey publicly until its published nationally at the end of March.

Recommendation for the Board/Committee to consider:							
Consider for Action	**X**	**Approval**		**Assurance**	**X**	**Information**	**X**

Please identify which strategic priorities will be impacted by this report:				
Covid-19 - Recovering effectively	*Yes*		*No*	**X**
CQC Getting Back to Good – Continuous improvement	*Yes*	**X**	*No*	
Transformation – Changing things that will make a difference	*Yes*	**X**	*No*	
Partnerships – working together to make a bigger impact	*Yes*	**X**	*No*	

Is this report relevant to compliance with any key standards?					State specific standard
Care Quality Commission Fundamental Standards	*Yes*	**X**	*No*		In relation to delivery of the Back to Good Programme
Data Security and Protection Toolkit	*Yes*		*No*	**X**	
Any other specific standard?					

Have these areas been considered? YES/NO					If Yes, what are the implications or the impact? If no, please explain why
Service User and Carer Safety and Experience	*Yes*		*No*	**X**	
Financial (revenue &capital)	*Yes*	**X**	*No*		Rising fuel costs.
Organisational Development /Workforce	*Yes*	**X**	*No*		Staff Survey Opportunities to work in partnership with the Alliance on Workforce.
Equality, Diversity & Inclusion	*Yes*	**X**	*No*		Implications of the Levelling Up the United Kingdom White Paper
Legal	*Yes*		*No*	**X**	

Title	Chief Executive Briefing

Purpose

The purpose of this report is to inform the Board of current national, regional and local policy and issues that require consideration in relation to our strategic priorities and Board Assurance Framework risks, and to stimulate Board strategic discussion.

1. National Issues of Organisational Interest

1.1 Ukraine

The conflict has been evolving and our government's reaction to it since it began in earnest a month ago. Nationally and locally the NHS has considered these changing implications for our service users, staff and the way we work following sanctions imposed on Russia and we have responded accordingly.

There appear to be very few people in Sheffield and our staff teams from either a Ukrainian or Russian heritage, making it more important we stay vigilant to individuals or families affected by the conflict, and be ready to support them. The city is considering how we can support the health and care needs of refugees should they come to Sheffield, tapping into our established arrangements used for recent conflicts elsewhere in the world.

All implications such as procurement, logistics, and of course well-being of staff and service users are being monitored and agreed through our business continuity command structure already in place since the beginning of the CoVid pandemic.

All our arrangements and support are regularly communicated through our usual channels.

The Board are asked to consider our response to the conflict and any other action we could or should be taking as a leadership team.

1.2 Rising Fuel Costs

The Board will be aware that there is significant media coverage about the rising world fuel costs and its impact on our community workers who rely on fuel to do their jobs.

We are monitoring this closely and responding to staff concerns as they emerge, working closely with staff side colleagues.

The rates for reimbursement of fuel and expenses are set nationally and at the time of writing this report we are aware that this is being considered at national level. We would want and expect a national steer to support all our staff who rely on their cars and public transport to carry out their duties at work, rather than find local solutions.

We are also monitoring our energy costs across the organisation and reviewing all our contracts to ensure that we have done everything possible to secure the most competitive prices for our energy in the context of escalating prices.

All of this will be discussed in more detail through our Finance & Performance Committee and risks escalated accordingly.

2. Transformation: Changing things that will make a difference

2.1 Levelling Up the United Kingdom – White Paper

The government published the levelling up white paper on 2nd February 2022, which set out a broad approach to rebalancing the UK economy and addressing significant regional inequalities that have the impact of holding people, places and prosperity back.

The white paper recognises the need to focus on both economic and social decision making, recognising the strong links between health, education and skills with the sider economy.

A separate white paper on health disparities will be published later this year to address the significant gap in health outcomes, with a particular focus on narrowing the gap in healthy life expectancy in local areas.

Levelling Up the United Kingdom is an important underpinning document for the development of the emerging Integrated Care systems and more broadly the agenda leaders across the NHS and social care. The paper is expected to have direct and indirect implications for service demand, population health, workforce supply, innovation and local partnerships.

Proposals in the paper relating to devolution could bring significant changes in local decision making and the changes to funding, for example the UK Shared Prosperity Fund, should enable this.

The Board are aware of the focus on the Inequalities agenda as we refresh strategies at system (Integrated Care Systems), Place (Health Care Partnership), the Mental Health, Learning Disability & Autism Partnership (Alliance) and our own strategic focus. This paper will strengthen that focus.

Our Director of Strategy is presently reviewing our focus and activity relating to Inequalities and the Board will have an opportunity to consider in a future Board session to ensure the emphasis and desired outcomes are being achieved in line with our ambition.

The paper can be read in full at https://www.gov.uk/government/publications/levelling-up-the-united-kingdom

2.2 Mental Health Strategy

The Board will be aware that Sajid Javid, Secretary of State for Health & Social Care, announced a "complete reset" of the Long Term Plan this year, which will include a particular focus on mental health. It is expected that a cross party mental health strategy will be developed which will include consideration of the impacts of CoVid-19 on mental ill health and mental well-being, the significantly increased number of young people accessing mental health services and pressures on crisis services.

The present strategy implementation plan "NHS Mental Health Implementation Plan 19/20 – 23/24" is part way through, and still holds significant challenge nationally and locally to fully deliver, mainly because of the workforce challenge and potentially how the supporting funding is articulated and managed locally.

The Board will be kept up to date with progress against the implementation plan through our performance and transformation reports and committees, and any developments regarding the development of a new national mental strategy.

We can also use these developments to refresh our strategic priorities, particularly our "CoVid-19: Recovering Effectively" and "Transformation - Changing things that will make a difference".

3.   Partnerships: Working together to have a bigger impact

3.1   System, Place and Alliance Developments

This section will update the Board on activity in these areas since we last met.

The Board are aware the shadow Integrated Care System are appointing to the statutory posts, reported last time, and are presently recruiting to the Managing Directors for each Place. These will be important leadership roles as they will be our direct link with the system, and we will look to this role to support the strategic direction of health and care in the city.

The key elements of the role include:

- supporting the development and delivery of the long-term plan of the Integrated Care Board (ICB), with a particular focus on developing and implementing a shared place strategy
- be jointly responsible [*as an ICB board member*] for planning and allocating resources to meet the four core purposes of integrated care systems
- be the accountable executive for the formal delegation of funding and functions to place
- work with system partners to develop and deliver a long-term plan for the development of their Place which will deliver the aims of the ICS and the strategy as developed at Place. Delegation of resources will be such as to enable the delivery of this agreed Place plan
- be responsible for building partnerships and collaborating with wider ICS system leaders including provider collaboratives, public health, primary care, local government, voluntary and community sector, other partners and local people

Pearse Butler and Gavin Boyle, designate Chair and Chief Executive of the ICS, have commenced a series of workshops to co-create a refreshed set of strategic priorities for the system. The first of these took place earlier this month, attended by Chief Executives and Accountable Officers initially exploring expectations and ambitions for the ICS – what needs to stay, what needs to change and what the opportunities might be for the new elements of the architecture, for example the Health and Care Partnership.

The second of these sessions in April will explore key relationships.

3.2   Mental Health, Learning Disability & Autism Alliance

The Board are now meeting monthly, attended by Chairs and Chief Executives of all member organisations. At our last meeting we took the opportunity to orientate new members and refresh current members to our respective organisations, looking at strategic priorities, risks and opportunities to work together.

The main themes won't be surprising in that workforce (recruitment, education and training and career opportunities) emerged as a key theme but also an emerging theme about Research and Innovation, something all organisations are interested in and have differently developed offers which could be an area worth exploring further as a Partnership.

The recruitment processes are underway for the appointment for a Managing Director and Clinical Leader (one-year appointments) to support the Alliance as we develop our strategy and opportunities to strengthen the partnership.

4.   Getting Back to Good: Continuing to Improve

4.1   Performance Reviews

The Executive Team have been meeting with operational and corporate colleagues over the last three weeks to reflect on performance objectives since the last review, identify areas of opportunity risk and help required and agree priorities for the next period.

This is all in line with and set out in our Performance Framework which you can read here if you want a refresh - SHSC Performance Framework Nov 2020

Our Lead Executive (Phillip Easthope) and the Performance Team will provide a summary report for the Finance & Performance Committee and escalate pertinent information and risks to Board.

Generally, it was tangible how much more confident the leadership teams were to talk about the full range of performance indicators, where they have made progress and where there is more to do. They were much clearer about their own roles and when they needed help, and who from.

There was much more joined up working between the operational teams and their corporate business partners, but still work to do to support teams to engage with other teams for mutual support, and shared understanding.

4.2   Staff Survey

The staff survey results will be published on 30th March and are embargoed from the public domain until that point. They can however be shared internally with leaders and managers to optimise the information and subsequent agreed action.

Leaders across the organisation have had the opportunity to consider the emerging themes and feedback from staff, and the Board and separately the Executive have taken significant time out to explore what all our staff feedback is telling us, where to focus our energies and how to develop our leadership styles and approaches to respond to what we are hearing.

The information used includes the staff surveys from several years for comparison and our pulse checks, along with other intelligence gained on Board and Executive Team visits to services.

This year specific questions were asked about the impact of CoVid-19 and had more emphasis on how it feels to work in a team.

The survey and agreed responses and actions will be reported at our Public Board Meeting in May 2022.

The Board are asked to contribute any further reflections on our development time where we discussed our staff feedback in depth, bearing in mind we are not able to share content of this year's staff survey publicly until its published nationally at the end of March.

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March 2022