



Board of Directors - Public

SI	UMMARY	•	Meeting Date:	ting Date: 25 May 2022										
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Re	port Title	Chief Executive E	Chief Executive Briefing											
	Author(s)	Jan Ditheridge, Ch	Jan Ditheridge, Chief Executive											
Accountable	Director	Jan Ditheridge, Chief Executive												
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Is this report relevant to comp	State specific standard												
Care Quality Commission		Yes	X	No		In relation to delivery of the Back to Good							
Fundamental Standards						Programme							
Data Security and		Yes		No	X								
Protection Toolkit													
Any other specific		Yes	X	No		Data Reform Bill							
standard?													
Have these areas been considered? YES/NO If Yes, v						hat are the implications or the impact?							
			If n	If no, please explain why									
Service User and Carer Safety Yes		X	No	Qu	Queen's Speech								
and Experience													
Financial (revenue &capital) Yes		X	No	Qu	Queen's Speech								
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Organisational Development Yes		X	No	Sta	Staff Survey								
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Equality, Diversity & Inclusion Yes		X	No	Coi	Conversion Therapy Bill								
Legal Yes		X	No	Qu	Queen's Speech								
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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

1.1 The Queen's Speech 10th May 2022

HRH Prince Charles outlined the government's priorities for the year, pointing to laws that will be passed in the coming year.

There were 4 key themes:

- Growing the economy to address the cost of living
- Making the streets safer
- Funding the NHS to clear the CoVid backlog
- Providing the required leadership in challenging times

From an organisation perspective, while all themes are important and will have an impact on our communities and the way we deliver services, it is CoVid recovery and the cost-of-living challenges that probably most closely align to our priorities and risks.

It is important that funding is available to support Mental Health, Learning Disability and Autism and Substance Misuse services as well as the focus on physical health elective recovery, critically continuing to implement the Mental Health Investment Standard priorities. There is national and local advocacy to ensure this is the case and we must be mindful of this when agreeing our financial plans and priorities over the coming two years. The government have identified £8billion for elective recovery over the next three years.

The cost-of-living challenges are being felt by everyone and of course our most financially vulnerable the most. This will impact on our service users and their well-being and we may see new service users as a direct impact of financial hardship. We must ensure our plans reflect this potential impact.

We also know that the cost of living is affecting our staff and their families, and we continue to listen and discuss with them and their staff side representatives to ensure that they have help and support if they are experiencing financial hardship.

There are a range of key announcements that will directly or indirectly affect Health and Social Care including:

Women's Health Strategy – the first ever, to be published later in 2022 with an emphasis on women's health issues ensuring they are prioritised and there is equity of access based on clinical need.

Health and Social Care Levy – along with an increase to the rates of dividend tax, will increase spending for health and social care by approximately £23 billion per year.

This along with the 2018 NHS settlement will increase the NHS resource budget to £162.6 billion by 2024-25.

The government have also committed £5.9 billion in NHS Capital over three years targeted at new beds, equipment and technology.

This investment is clearly welcome, and we need to ensure that our plans enable this focused funding to target our priority areas for development, both revenue and capital.

This also will need some careful explanation when supporting our staff to engage in our challenging cost improvement and efficiency targets required to balance our accounts locally, within the organisation, system and nationally.

Energy Security Bill – promising to deliver cheaper, cleaner and more secure energy. Our Sustainability leads will ensure that we integrate the impacts and recommendations from this Bill as they emerge.

Procurement Bill - The aim of this Bill is to endeavour to create a simpler and more transparent system, which will include more flexibility for public sector buyers and make it much easier to buy at pace to protect life, health or maintain public order.

Modern Slavery Bill – strengthening the protection and support for victims of human trafficking and modern slavery. This will require organisations to publish their modern slavery statements on a government run registry, with mandated areas for reporting requirements.

We will ensure that we understand the requirements of this Bill and take action accordingly. Caroline Parry, Executive Director of People, and Beverley Murphy, Executive Director of Nursing, Professions and Operations, are the Executive leads.

Bill of Rights – the reform of the Human Rights Act which enshrines the right to life and offers important protections from discrimination.

Our Human Rights lead will ensure that our policies and guidance reflect the changes as they become law.

Social Housing Regulation and Renters Reform Bill – these two Bills are aimed at improving safeguards for tenants, improving conditions and standards of accommodation and increasing accountability for Landlords.

Really important Bills for our service users, potential service users and our services given the direct links between having a permanent and decent home and mental well-being.

Data Reform Bill - This will create a new UK data protection framework, modernising the work of the Information Commissioner's Office, increasing its powers and reach.

Our IT and Information Governance teams will consider the implications of these changes, report back and take agreed action. The Board are scheduled for a briefing regarding Data security as part of our routine updates and development and this will be included. Phillip Easthope, Executive Director of Finance, is the Executive lead for this work.

All of the above legislation changes have a bearing on the work we do and will in some cases change how we deliver our services and who we deliver them to. However, the *Draft Mental Health Act Reform Bill* is probably the most important and immediately practice changing announcement for our organisation in the Queen's Speech. The Board are well aware of its development and we have contributed our thoughts through the consultation process. By way of a reminder the main aims of the Bill are:

 People can no longer be detained because they have a learning disability or autism. This will be important in our discussions in the redesign of our learning disabilities pathways.

- Criteria are changing making it clearer that people can only be detained if there is a genuine safety risk to self or others and where there is clear therapeutic benefit. This is timely as we redesign our Acute Inpatient services and echoes our clinical strategy principles.
- To increase advocacy opportunities and more choice on who should be involved in their detention if required replacing nearest relative with nominated person.
- The introduction of a new form of supervised community discharge which we will consider as the community teams redesign.
- To increase opportunities for Appeals to Tribunals.
- All detained patients will have statutory care and treatment plan written with the patient setting out a clear agreed pathway for discharge.

The Conversion Therapy Bill - Finally, but importantly, this Bill will ban Conversion Therapy practices intended to change sexual orientation. The main elements of the Bill are:

- Respecting clinicians' independence. The Bill will not impact the existing professional frameworks that guide clinicians' ability to support people. Robust, exploratory and challenging conversations which are part of regulated care do not fall within the scope of the ban.
- Strengthening existing criminal law by ensuring that violent conversion therapy is recognised as a potential aggravating factor upon sentencing.
- Introducing a criminal offence banning non-physical conversion therapies to complement existing legislation which protects people from acts which inflect physical harm. The offence will protect under-18s regardless of circumstance, and over-18s who do not consent and who are coerced or forced to undergo Conversion Therapy practices.
- Introducing Conversion Therapy Protection Orders.
- Protecting freedom of speech, ensuring parents, clinicians and teachers can continue to have conversations with people seeking support.

We will continue to safeguard everyone's right to express their sexual orientation and will not be discriminated as a service user or as an employee because of it.

The Board are asked to formally recognise that Conversion Therapy is not practiced in our organisation.

The Board are asked to consider the contents of the Queen's Speech and consider if any of the Bills or announcements materially and immediately impact on our focus, priorities opportunities or risks.

You can find the link https://www.gov.uk/government/speeches/queens-speech-2022

1.2 Mental Health Units (Use of Force) Act 2018

The Board will be aware that the above Act came into force on 31st March 2022.

The Act is also known as Seni's Law, named after Olaseni Lewis, who died as a result of being forcibly restrained while he was a voluntary patient in a mental health unit.

The key aim of the Act is to reduce use of force in mental health units (including those for people with a learning disability and autistic people) and where it does happen, to be open and transparent about it, being clear about accountability and responsibility.

The Board will know that this has been a key area of practice improvement for us, a key element of our Back to Good Programme and regularly discussed within our Committees and Board. Our aim is to ensure that all our service users experience high quality care, are treated with respect and dignity and the principle of least restriction is always applied. This requires a person-centred approach (at the heart of our clinical strategy) and a skilled compassionate team.

We have monitored progress against our plan through the Back to Good Programme Board and Quality Assurance Committee both reporting to Board. The recommendations and requirements in the Act have been addressed and monitored through the Mental Health Legislation Committee. Progress has been recognised and assurance gained that we comply with all aspects of the Act.

This will always be an area of focus and risk for practitioners and Board level leaders and we will continue to develop and lead this important work.

Beverley Murphy, Executive Director of Nursing, Professions & Operations, is the Executive lead and Lorena Cain is our clinical leader who has championed and led much of this work. You can find the Act and guidelines here if you wish to read more:

https://www.legislation.gov.uk/ukpga/2018/27/enacted

https://www.gov.uk/government/consultations/mental-health-units-use-of-force-act-2018-statutory-quidance

2. System & Place Issues

The Health & Social Care Bill received Royal Assent on 28th April 2022, which paves the way for the Integrated Care Systems and changes to Clinical Commissioning Groups and the NHS architecture outside NHS Provider Trusts, to be completed on the 1st July 2022.

Some members of the Board have been very involved in the design and purpose of the new architecture and organisations as partner and system arrangements morph from coalitions of the willing to statutory functions.

There is no doubt that much of the discussion over the last few months has been about governance structures and arrangements, and the appointment to the new roles within the new structures necessary to ensure that the transfer of accountability, responsibility and stewardship is safe and creates vehicles capable of delivering the transformation set out in the Bill and priorities discussed earlier in the Queen's Speech and most importantly to deliver the Triple Aim: making it our duty to consider:

- The health and well-being of our populations
- The quality of services provided to individuals
- The efficiency and sustainability in relation to the use of resources

in all our planning and decision making.

Progress has been made to transition in July with appointment to most Board positions of the Integrated Care Board and Place Director roles.

There is an acknowledgement that these changes, who is in these roles and how they will support the delivery of the system and Place (in our case Sheffield) will need to be re-communicated with our communities and populations as the new statutory bodies take up their roles.

The Board will be aware that Linda Wilkinson, Director of Psychological Services, has been appointed to the role of Clinical Director to the South Yorkshire Mental Health, Learning Disability & Autism Alliance

on a secondment basis. This is really good news and should support acceleration of the work of the MHLDA Alliance (Collaborative) now both the Managing Director, Marie Purdue, and Linda have been appointed.

The Board are asked to acknowledge the progress made as we move to new structures within the NHS as defined in the Health & Social Care Bill.

3. Organisation Focus

3.1 New South Yorkshire Mayor

Election of a new South Yorkshire Mayor has taken place and Oliver Coppard was the successful candidate.

3.2 Executive Focus

The Executive team continue to focus on the delivery of all of our priorities but I thought it may be helpful for the Board to understand where there is a particular focus as a team since our last Board meeting and before the next one.

Chief Executive and some Executive Directors - System, Place and Alliance arrangements in line with the Health and Care Bill described earlier.

All Executives – Planning, including further development of financial plans and quality impacts – including a particular focus on improving our approach to Cost Improvement.

Staff Survey – As the detail is shared, understanding what it is telling us in discussion with our teams and responding accordingly.

Leadership Development – We are all engaged in the leadership development programmes presently in train, either as participants, as facilitators or as sponsors.

Engaging with our staff - A series of Away Days (that all Board members have been involved in) have been taking place to engage with staff face to face, as we emerge from CoVid, in an attempt to improve our two-way communication, focusing on "making sense of our strategy". More is planned for the Summer.

Interviews for Non-Executives Directors – While none of us are involved in the interview panel process, we have all been involved in the activities surrounding the process, either through providing candidates with the opportunity to ask questions or on stakeholder groups.

The Board are asked to consider if these areas of work, while not exhaustive, reflect our priorities and areas of focus.

JD/jch May 2022