

Board of Directors Meeting in Public - Cover Sheet

Subject:	Acting Chief Executive's report		Date:	5 th Sept 2024	
Prepared By:	Rich Brown, Head of Communication				
Approved By:	David Selwyn, Acting Chief Executive				
Presented By:	David Selwyn, Acting Chief Executive				
Purpose					
An update regarding some of the most noteworthy events and items over the past month from the Acting Chief Executive's perspective.				Approval	
				Assurance	
				Update	Y
				Consider	
Strategic Objectives					
Provide outstanding care in the best place at the right time	Empower and support our people to be the best they can be	Improve health and wellbeing within our communities	Continuously learn and improve	Sustainable use of resources and estates	Work collaboratively with partners in the community
Y	Y	Y	Y	Y	Y
Principal Risk					
PR1	Significant deterioration in standards of safety and care				
PR2	Demand that overwhelms capacity				
PR3	Critical shortage of workforce capacity and capability				
PR4	Failure to achieve the Trust's financial strategy				
PR5	Inability to initiate and implement evidence-based Improvement and innovation				
PR6	Working more closely with local health and care partners does not fully deliver the required benefits				
PR7	Major disruptive incident				
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change				
Committees/groups where this item has been presented before					
None					
Acronyms					
BAF = Board Assurance Framework CDC = Community Diagnostic Centre CT = Computed tomography GP = General Practitioner HSJ = Health Service Journal ICS = Integrated Care System					
Executive Summary					
An update regarding some of the most noteworthy events and items over the past month from the Acting Chief Executive's perspective.					

Operational updates

Overview of operational performance

Demand across our urgent and emergency care pathway continued to be high and above plan in July 2024, with the sustained high demand places pressure on our urgent and emergency care pathway, with patients having to wait longer than we would wish for treatment and admission.

In August 2024, however, we have seen a seasonal ease in urgent and emergency care demand and a corresponding improvement in many of our operational performance metrics. This indicates that our underlying systems and processes are good and that it is our ability to cope with demand above planned levels that constrains our operational delivery.

Thankfully, we have not yet seen a significant impact on the Trust's services as a result of the collective action that has been taken by some local General Practice (GP) doctors in the Nottingham and Nottinghamshire Integrated Care System (ICS).

At the time of writing, our four-hour emergency access performance for the month-to-date for August is at the strongest position for over two-and-a-half years.

We also continue to benchmark among the best trusts in the country for ambulance handover times – a position we are proud of, as it recognises the emphasis we place on releasing ambulance crews to respond to the needs of our local community. That performance attracted media coverage in the Health Service Journal (HSJ) during August, where the Trust's ambulance handover times were named as the best anywhere in the Midlands. We look forward to sharing more about our ambulance handover performance at a future board meeting over the coming months.

The number of patients classified as 'medically safe for transfer' remaining in our hospitals once they have received the vital specialist hospital care they need and whose ongoing needs can be provided elsewhere. In August, the number of those patients we continued to care for in our hospitals remained below our operational planning levels. The challenge ahead of winter is maintaining low levels of discharge delays to support good hospital flow.

We are seeing a continued reduction in the number of planned care patients on our waiting list, including those patients waiting over 52- and 65-weeks for treatment. The number of long-wait patients remained below our planned levels at the end of July 2024.

From a diagnostics perspective, echocardiography, computed tomography (CT) cardiac and cystoscopy are our most challenged modalities, which we have recovery plans in place with weekly oversight.

Within our cancer services, we continue to meet the national 28-day faster diagnosis standard. We delivered against our planned performance level in June 2024 for our cancer 31-day and 62-day treatment metrics, although we recognised we have further work to continue to improve in the treatment phase of our cancer pathway.

A more comprehensive update on our operational performance will be presented at the November Trust Board meeting, where we are due to reflect on our quarter two 2024/25 performance in more detail.

NHS Oversight Framework 2023-24: Quarter 4 Segmentation

Amanda Sullivan, Chief Executive of the NHS Nottingham and Nottinghamshire Integrated Care Board (ICB), formally wrote to the Trust on 21st August 2024 to confirm the Trust's Quarter 4 2023-24 segmentation position and to set out the process and timescales for the 2024-25 Quarter 1 segmentation assessment. That letter is provided in full in appendix one of this report.

It was agreed that for Quarter 1 2024-25, Sherwood Forest NHS Foundation Trust should remain in Segment 2 of the NHS Oversight Framework. This rating is based on the quantitative and qualitative assessments of the five national themes and one local priority contained within the NHS Oversight Framework.

While the Sherwood Forest position will remain at Segment 2 for Quarter 1, there are rising concerns which will need to be addressed to prevent a movement into Segment 3 for future quarters, these are in relation to having:

1. a financial plan which is not balanced and/or there is a material actual or forecast deficit (this is a trigger for NOF 3 segment), recognising the financial challenges we face as a Trust.
2. deterioration in performance or sustained very poor (bottom decile) performance against one or more areas

The Trust's financial position will continue to be monitored through future updates to the Trust Board, where I will commit to continue to update the Board on our ongoing engagement with the Nottingham and Nottinghamshire Integrated Care Board and NHS England.

Despite many of the challenges the Trust faces are reflected in that assessment, the rating also recognises a number of areas that the Trust can be rightly proud of as the Trust continues to perform well against the Oversight Framework assessment metrics, with a significant amount of performance areas continuing to be in the upper quartile nationally.

The assessment also sets out the 'exit criteria' for the Trust as the next steps that will be required to progress from Segment 2 and not move to Segment 3. In order to realise this, the Trust will need to undertake the following actions:

1. Address the underlying and in-year deficit of the Trust, providing a plan to return to financial balance by March 2026, working across the system, to ensure a clear plan is in place with evidence of progress being made.
2. Continue to progress elective recovery through increasing productivity, ensuring sustained eradication of 78 weeks, achievement of the 65-week and 52-week reductions in 2024, maintain 62-day backlog reductions and deliver improvements for the diagnostic 6-week waits, especially with regard to the ECHO waits.
3. Address areas of rising risk across urgent care, including delivery of the 4-hour and 12-hour position
4. Continue to provide active contribution to the overall system financial sustainability, quality improvements and outcomes.
5. To be a key contributor to the wider system as an anchor institution.

As a new oversight framework is expected to be implemented in the autumn, NHS England is pausing the proactive segmentation review process for Quarter 2 and do not require a formal submission Nottingham and Nottinghamshire Integrated Care System from the ICB. The ICB will instead continue to undertake an internal review and assessment with providers for Quarter 2, as a way of monitoring progress against the segmentation drivers to support the ICB in fulfilling its current responsibility as set out in the NHS Oversight Framework. This will help the Integrated

Care Board (ICB) to maintain local oversight of local provider organisations, with NHS England maintaining statutory accountability for NHS provider organisations.

I will continue to keep the Board updated about this oversight review as it is undertaken each quarter.

Newark Urgent Treatment Centre (UTC) update

The Trust has been continuing its preparations to implement the new extended opening hours for Newark Urgent Treatment Centre (UTC), following the decision from the Nottingham and Nottinghamshire Integrated Care Board (ICB) to amend the opening hours of the facility.

Earlier this year, the Nottingham and Nottinghamshire Integrated Care Board (ICB) made its decision on the future opening hours of Newark Hospital's Urgent Treatment Centre (UTC) following feedback from residents, stakeholders and clinical input from healthcare experts.

The UTC, which is run by Sherwood Forest Hospitals NHS Foundation Trust, provides urgent care and non-life-threatening treatment for injuries or conditions, such as cuts, simple broken bones, wounds, minor burns and minor head, eye and back injuries.

Currently, the Urgent Treatment Centre operates between 9am and 10pm as a temporary measure, with the last patient being admitted at 9.30pm. As a result of the ICB decision on the Centre's permanent opening hours, the UTC will open between 8am and 10.30pm each day, seven days-a-week. Under the new opening hours, the last patient will be admitted at 9.30pm each day.

The new permanent opening hours will offer an extended window for patients to access essential healthcare services, opening earlier and longer to support people who need to access the service around working patterns and school times.

Once the new opening hours are introduced, the service will be open for 14.5 hours per day – exceeding the 12-hour minimum national standard for UTCs set by NHS England, as well as the current temporary operating hours at the UTC.

As part of the decision-making process, the Trust supported the ICB in engaging with residents and stakeholders to ensure that the preferred option for the UTC opening hours aligned with the community's needs. The feedback from residents of Newark clearly indicated the high value they place on the service received at the UTC. While there was clearly a strong preference for a return to 24 hours opening, this was balanced against other factors within a rounded, evidence-based decision.

The evidence-based decision follows a review by the East Midlands Clinical Senate and their subsequent recommendation to make permanent the overnight closure of the Urgent Treatment Centre.

Since that decision was made, the Trust has been working to implement those changes to the Centre's opening hours, including by undertaking formal consultation with the Trust staff who work there.

Once introduced, both the Trust and the ICB will also continue to assess the impact of the extended operating hours, monitoring usage and reviewing patient feedback to ensure we continue to provide a responsive service to local people.

Partnership updates

Meeting with Lee Anderson MP for Ashfield

During August, I met with the Member of Parliament (MP) for Ashfield, Lee Anderson MP, alongside the Trust's Chief Nurse, Phil Bolton, and its Director of Midwifery and its Divisional Director of Nursing for the Trust's Women and Childrens Division, Paula Shore.

The meeting was held ahead of Mr Anderson preparing to hold a parliamentary listening event and debate into preventable baby loss, which is due to take place in September.

The meeting proved very constructive meeting, both in providing an opportunity to provide a factual briefing before that parliamentary debate – as well as to discuss the Trust's wider maternity services, including our work to reduce smoking rates in pregnancy.

On Friday 23rd August 2024, we were delighted to welcome Mr Anderson back to the Trust for a walkaround of the Trust's maternity services to showcase the care we provide at Sherwood to help inform that debate.

Other Trust updates

Supporting Trust staff Southport murders and subsequent national unrest

As a Trust Board, we were saddened to hear the news of the tragic deaths of three young girls in Southport – Bebe King, six, Elsie Dot Stancombe, seven, and Alice Dasilva Aguiar, nine, were killed in the stabbing in Southport on Monday 29th July 2024.

The thoughts of everyone here at Sherwood Forest Hospitals remain with the friends and family of everyone affected by that tragedy.

Those events led to deplorable violent demonstrations across the country and while those demonstrations were thankfully not been seen in the communities of Mansfield, Ashfield, Newark and Sherwood that we primarily serve, we know that the national impact of those events were felt by colleagues at our Trust.

Here at Sherwood, we know how proud we all are of the diversity of our workforce and the part you all play in making great patient care happen across our hospitals. Celebrating the diversity of our people and the communities we all serve is at the heart of everything we do here as a Trust.

Following those events, we took the proactive step of reaching-out to all Trust colleagues with a message of support during what was a difficult time for many – a point that is especially true for colleagues from minority groups who felt particularly threatened during these national events.

The message also signposted colleagues to support provided by the Trust, as well as to encourage anyone who experienced physical, verbal, racial or any other kind of abuse while working in our hospitals to report it as soon as possible so we can take swift and decisive action.

During the month, members of our Executive Team also joined a number of vigils for peace that were held in faith spaces across all three Trust sites for colleagues to attend.

Trust prepares to host Annual General Meeting (AGM)

On Tuesday 24th September 2024, we are due to host our Annual General Meeting (AGM) at King's Mill Hospital to provide an in-depth look at the Trust's performance over the 2023/24 financial year – as well as highlighting how the Trust is planning to meet the challenges it will face for the remainder of 2024/25 and beyond.

The Trust's Annual Report and Accounts for the year ending 31st March 2024 will also be formally presented at the meeting, with our annual report already having been published on the Trust's website at www.sfh-tr.nhs.uk/about-us/publications-and-reports/ along with our Quality Report. A summary annual report will also be made available prior to the Annual General Meeting.

Members of the public are welcome to attend the AGM in-person, with the meeting also due to be streamed online. If you would prefer to observe the meeting online, you can email sfh-tr.communications@nhs.net and a link will be shared with you.

There will be an opportunity to put your questions to the Trust's Board of Directors at the meeting. All questions must be submitted in advance of the meeting by emailing sfh-tr.communications@nhs.net before midnight on Thursday 19th September 2024.

As with last year's Annual General Meeting, this year's event will also be hosted alongside the Trust's latest *Step into the NHS* careers showcase event in the hospital's main reception area.

The showcase will give anyone attending the event an opportunity to find out more about the work that is going on across our hospitals, as well as sharing the range of career opportunities within the Trust with potential job seekers.

Anyone attending the event is welcome to attend the showcase event which will begin after the meeting.

Anyone wishing to attend the Trust's *Step into the NHS* careers showcase event can [secure their place online via the Eventbrite booking system](#).



Demolition of Victoria Hospital makes way for purpose-built Community Diagnostic Centre at Mansfield Community Hospital



During August, we were excited to reach a new milestone in the development of the new Community Diagnostic Centre (CDC) at Mansfield Community Hospital.

In February this year, work commenced on-site at the site in Stockwell Gate, Mansfield, and the Trust is excited to share that the derelict building formerly known as Victoria Hospital has now been completely demolished. That demolition has paved the way for building works to start on-site, with a grand opening of the new CDC site anticipated for spring 2025.

Hospital patients have already benefited from more than 38,000 extra diagnostic tests before the first brick has been laid for Nottinghamshire's first CDC. Once fully operational, Mansfield CDC will provide a one-stop shop for patients across Nottinghamshire to access the tests and investigations they need in a single visit to help them receive an 'all clear' or diagnosis sooner. As well as delivering thousands more tests each week, the CDC will also create hundreds of job opportunities.

In May 2024, the Trust submitted its updated planning application for the Mansfield CDC, with the new plans outlining the expansion of diagnostic services, ensuring faster and more convenient access to a variety of tests and investigations. The Trust is anticipating that planning application to be determined by Mansfield District Council in early September.

Throughout the demolition process, the Trust have prioritised sustainability and community benefits. As a result of these efforts, the demolition has achieved a 90% recycle rate on the waste generated on-site, with approximately 60% of the loose items within the building having been reclaimed to be re-used and recycled.

Additionally, the building's rubble will be crushed to form the levels for the rebuild works, saving 1,500 tons of imported material. By involving four local contractors in the demolitions works, the Trust ensured that the investment in this project benefits the local community.

For more information on the project, please visit our site at www.sfh-tr.nhs.uk/cdc



Caption: The artists' impression of how the Mansfield Community Diagnostic Centre is expected to look under the Trust's revised plans

Trust risk ratings reviewed

The Board Assurance Framework (BAF) Principal Risk 7 ('A major disruptive incident'), for which the Risk Committee is the lead committee, has been scrutinised by the Trust's Risk Committee. Committee members discussed the risk scores and assurance ratings but decided that they should remain unchanged.

The full and updated Board Assurance Framework (BAF) is next due to be presented at the Public Meeting of the Trust's Board of Directors in November.